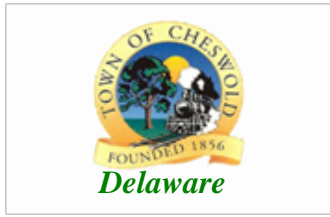


Town of Cheswold
1856



Application # _____

State of Delaware
1787

P.O. Box 220 – Cheswold, Delaware, 19936
Phone: (302) 734-6991 – Fax: (302) 734-1355

ANNEXATION REQUEST

******* APPLICATION *******

The undersigned hereby makes formal application to the Town of Cheswold, Delaware, for the approval of ANNEXATION, for the property described below.

Applications must be presented at the appropriate meetings or hearings as specified in the attached Annexation Application Request Procedure.

The Petitioner should be aware that no applications will be accepted if violations exist on the property, or if any service fees, including taxes, are delinquent.

There are application and public hearing fees associated with an annexation request. They are based on the size and type of property or business/es to be annexed. The Town Clerk will provide total annexation fee costs, when the application is requested or upon request.

The Petitioner will return the completed annexation request with 3 copies of the following:

- A. Surveyor’s plot with seal, and;
- B. Survey description, and;
- C. Copy of deed or other Official property description;
- D. Completed Annexation Request Data Form (AP 10-12-2010-05), and;
- E. Establish escrow account for engineering review fees.

PROPERTY OWNER INFORMATION:

Name of Property Owner: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____ E-mail Address: _____

SIGNATURE: _____ **DATE:** _____

CONTACT PERSON INFORMATION (If applicable):

Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____ E-mail Address: _____

CHESWOLD ANNEXATION REQUEST

******* APPLICATION *******

REQUESTED ANNEXATION PROPERTY LOCATION INFORMATION:

Business Name, (if applicable): _____

Property Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____ E-mail Address: _____

PHYSICAL PROPERTY LOCATION INFORMATION:

(N)(S)(W)(E) Side of: _____ or (N)(S)(W)(E) Feet from : _____

or (N)(S)(W)(E) Intersection of: _____

LOT #: _____ TAX Map #: _____

Acreage _____ Building Square Footage: _____

PROPERTY ZONING:

<u>CURRENT</u>	<u>REQUESTED</u>
Property Use: _____	Property Use: _____
Zoning District: _____	Zoning District: _____
Zoning Code: _____	Zoning Code: _____

TOWN of CHESWOLD ZONING DISTRICTS & CODES

<u>ZONINGDISTRICT</u>	<u>ZONING CODE</u>
Old Town Residential	R-1
Single and Two Family Residential	R-2
Multi-Family and Townhouse Residential	R-3
Manufactured Home Park and Trailer Park	R-4
Neighborhood Business <i>(primarily serves surrounding neighborhood)</i>	C-1
Highway Commercial <i>(primarily serves Rte. 13 corridor)</i>	C-2
Light Industrial	I-1
Heavy Industrial	I-2

CHESWOLD ANNEXATION REQUEST

******* APPLICATION *******

For Town Use Only:

Property Location Address: _____

Application Received by: _____ Date: _____

Title: _____

Application Accepted at Town Council Meeting held on: _____ APPROVED BY MAJORITY VOTE

Verified by: _____ Date: _____
Mayor – Town of Cheswold

Certified by: _____ Date: _____
Secretary – Town of Cheswold

Notarized by: _____ Date: _____
Town Clerk – Town of Cheswold

<u>ACTION ITEMS</u>	<u>APPRV.</u> <u>or</u> <u>COMPL.</u>	<u>DENIED</u> <u>or</u> <u>N/A</u>	<u>DATE</u>
1. Zoning District and Code Acceptance <i>(by Plng. Commission- part of Appl. Process)</i>			
2a. Application Acceptance by Town Council <i>(Complete within 90 days of receipt of application)</i>			
2b. Application Documents to Town Engineer-Prepare Plan of Services			
3. Resolution Proposing Annexation with Date of Public Hearing			
4. Mayor/Rep. & Town Engineer Mtg. w/Petitioner to Finalize Agreement			
5. Public Hearing held at Council Meeting – Incl. Resolution of Special Election			
6. Plan of Services to State Office of Planning Coordination <i>(within 10 days of Hearing)</i>			
7. Response from State Office of Planning Coordination <i>(due within 20 days of receipt)</i>			
8. Resolution from Council to Annex; Approve Agreement; Approve Zoning			
9. Vote on Annexation at Next Town Council Meeting			

Original of Approved Annexation Resolution to Kent County Recorder of Deeds plus check for \$51.00

Forwarded by: _____ Title: _____ Date: _____