



DEPARTMENT OF COMMUNITY DEVELOPMENT
PLANNING DIVISION

For Internal Use Only

Case _____

Date _____

Tel. (239) 574-0553

Fax (239) 574-0591

P.O. Box 150027

Cape Coral, FL 33915-0027

ANNEXATION APPLICATION

ANNEXATION APPLICATION REQUIREMENTS

1. Legal Description
2. Letter of Intent
3. Deed of Ownership
4. Applicant's portion of request shall be typewritten, and signature notarized
 - All forms (Application, Acknowledgment Form, Authorization to Represent) must be signed by the property owner or the applicant. If the Authorized Representative is an attorney, the application and the Acknowledgment Form may be signed by the attorney and an Authorization to Represent Form is not required.
 - If there are any deed restrictions on the property, a copy of the restrictions will be required.
5. Survey signed and sealed with revised legal description of City territorial boundaries, if applicable
6. Aerial map showing surrounding zoning and land uses for 300 feet distance from property boundaries, excluding roads and canals
7. Existing County zoning and maximum allowable densities
8. Please refer to the Future Land Use Map Amendment Section 3.5.1 to 3.5.2. for additional information located in page six

APPLICATION FEES: \$500.00 for first 3 acres plus \$220.00 for each additional acre over 3 acres up to 20 acres; \$22.00 per acre for each acre over 20 acres. In addition to the application fee, all required advertising costs are to be paid by the applicant (ORD 39-03, Sec. 5.4.).



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ANNEXATION APPLICATION

PROPERTY INFORMATION

Project Name: _____

Location/Address _____

Strap Number _____ Unit _____ Block _____ Lot (s) _____

Plat Book _____ Page _____ Future Land Use _____ Current Zoning _____

PROPERTY OWNER (S) INFORMATION

Owner _____ Address _____

Phone _____ City _____

Email _____ State _____ Zip _____

Owner _____ Address _____

Phone _____ City _____

Email _____ State _____ Zip _____

APPLICANT INFORMATION (If different from owner)

Applicant _____ Address _____

Phone _____ City _____

Email _____ State _____ Zip _____

AUTHORIZED REPRESENTATIVE INFORMATION (If Applicable)

Representative _____ Address _____

Phone _____ City _____

Email _____ State _____ Zip _____



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If the owner does not own the property in his/her personal name, the owner must sign all applicable forms in his/her corporate capacity.

(ALL SIGNATURE MUST BE NOTARIZED)

The owner of this property, or the applicant agrees to conform to all applicable laws of the City of Cape Coral and to all applicable Federal, State, and County laws and certifies that all information supplied is correct to the best of their knowledge.

CORPORATION/COMPANY NAME (IF APPLICABLE)

OWNER'S NAME (TYPE OR PRINT)

OWNER'S SIGNATURE

OWNER'S NAME (TYPE OR PRINT)

OWNER'S SIGNATURE

APPLICANT NAME (TYPE OR PRINT)

APPLICANT SIGNATURE

I have read and understand the above instructions. Hearing date(s) will be confirmed when I receive a copy of the Notice of Public Hearing stipulating the day and time of any applicable hearings.

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online notarization, this _____ day of _____, 20__ by _____ who is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Signature of notary Public: _____

Printed Name of Notary Public: _____



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ACKNOWLEDGEMENT FORM

I have read and understand the above instructions. Hearing date(s) will be confirmed when I receive a copy of the Notice of Public Hearing stipulating the day and time of any applicable hearings.

I acknowledge that I, or my representative, must attend any applicable meetings scheduled for the Hearing Examiner and City Council.

I will have the opportunity at the hearing to present information pertaining to my request that may not be included in my application.

I understand any decision rendered by the CITY shall be subject to a thirty (30) day appeal period. Any work performed within the thirty (30) day time frame or during the APPEAL process will be completed at the applicant's risk.

I understand I am responsible for all fees, including advertising and recording costs. All fees are to be submitted to the City of Cape Coral with the application.

By submitting this application, I acknowledge and agree that I am authorizing the City of Cape Coral to inspect the subject property and to gain access to the subject property for inspection purposes reasonably related to this application and/or the permit for which I am applying.

I hereby acknowledge that I have read and understood the above affidavit on the _____ Day of _____, 20_____.

CORPORATION/COMPANY NAME

OWNER'S NAME (TYPE or PRINT)

OWNER'S SIGNATURE

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online notarization, this _____ day of _____, 20____ by _____ who is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Signature of notary Public: _____

Printed Name of Notary Public: _____



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AUTHORIZATION TO REPRESENT PROPERTY OWNER(S)

PLEASE BE ADVISED THAT _____
(Name of person giving presentation)

IS AUTHORIZED TO REPRESENT ME IN THE REQUEST BEFORE THE HEARING EXAMINER
AND CITY COUNCIL.

UNIT _____ BLOCK _____ LOT(S) _____ SUBDIVISION _____

OR LEGAL DESCRIPTION _____

LOCATED IN THE CITY OF CAPE CORAL, COUNTY OF LEE, FLORIDA.

PROPERTY OWNER (Please Print)

PROPERTY OWNER (Signature & title)

PROPERTY OWNER (Please Print)

PROPERTY OWNER (Signature & title)

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribe before me, by means of physical presence or online
notarization, this _____ day of _____, 20 by _____ who
is personally known to me or produced _____ as identification.

Exp Date: _____ Commission Number: _____

NOTARY STAMP HERE

Signature of notary Public: _____

Printed Name of Notary Public: _____

Note: Please list all owners. If a corporation, please supply the Planning Division with a copy of
corporation papers.



ANNEXATION REGULATIONS

Section 3.5.1. Annexations

- A. Purpose of Annexations. Annexations shall be considered for the following reasons:
1. The annexation implements the Comprehensive Plan.
 2. The annexation increases the City's inventory of non-residential lands.
 3. The annexation results in the removal of enclaves.
 4. The annexation results in the logical extension of City boundaries.
- B. Manner of Initiation. Applications to annex property in to the City may be initiated in the following manner:
1. The City Council; or
 2. By a petition of one or more owners of property within an area proposed for annexation.
- C. Review Criteria. Proposed annexations shall be reviewed in accordance with the requirements of Chapter 171, Florida Statutes.
- D. Effective date of approval: The effective date of an annexation will take place in accordance with Chapter 171, Florida Statutes.