

**ANNEXATION APPLICATION (UNOCCUPIED)** 

1400 Mt. Zion Parkway Mt. Zion, IL 62549 www.mtzion.com Office: 217-864-5424

Fax: 217-864-5935

TO BE COMPLETED BY THE APPLICANT:
Fees Paid: \$
Location of Subject Property (please provide all three)
<ol> <li>Address:</li></ol>
Present Use of Subject Property:
Present Zoning District: Proposed Zoning District:
Has the property ever been part of a force annexation petition? □ Yes □ No
Applicant Name:
Address:
Phone Number: Fax:
Email:
Owner Name (if different than applicant)
Name:
Owner Address:
Phone Number: Fax:
Email:
Proof of Standing provided:(Please attach proof of ownership, control, authorization, etc.)

## TO THE PRESIDENT AND BOARD OF TRUSTEES OF THE VILLAGE OF MT. ZION, ILLINOIS:

The undersigned, under oath, respectfully represent as follows:

- 1. That the petitioner is the owner of record of all the property herein described and attached to this Petition.
- 2. That the property herein described is not within the corporate limits of any municipality.
- 3. That the property herein described is contiguous to the Village of Mt. Zion, a municipal corporation.
- 4. That there are no electors residing on the property.
- 5. That the petitioner requests that the Village of Mt. Zion, a municipal corporation, annex the following described property:

(LEGAL DESCRIPTION ATTACHED AS EXHIBIT A)

WHEREFORE, Petitioner respectfully requests that the Corporate Authorities annex the above described property to the Village of Mt. Zion by ordinance, in accordance with the provisions of the Petition and pursuant to 65 ILCS 5/7-1-8 of the Illinois Municipal Code of the State of Illinois, as amended.

Dated this	day of	, 20		
			OWNERS	
				_
Subscribed and sw	orn to			
Before me this	Day of	, 20_	<u>_</u> .	
Notary Public				