



APPLICATION FOR ANNEXATION

Planning and Economic Development Department
 200 NE Moe Street | Poulsbo, Washington 98370
 (360) 394-9748 | fax (360) 697-8269
www.cityofpoulsbo.com | plan&econ@cityofpoulsbo.com

Washington State law governs annexation procedures. Annexation is a procedure for bringing unincorporated areas of a county into an adjacent incorporated city. The most common form of annexation is the “direct petition method,” whereby property owners or residents initiate and sign a petition asking to become part of the city. For more information about annexations, see the handout [here](#) or review the resources provided by the [Municipal Research and Services Center](#).

PROJECT INFORMATION:	
Address:	Parcel No:
Property Owner(s):	
County Zoning:	Requested City Zoning:
Current use of the land:	
Acreage of proposed annexation:	
APPLICANT/OWNER:	
If several individuals are applying together, list the additional names and addresses on a separate sheet and identify a representative below.	
Name:	
Address:	
Email:	Phone:
REPRESENTATIVE:	
Name of representative if different from the applicant indicated above. Groups and organizations must designate one person as their representative/contact person.	
Name:	
Address:	
Email:	Phone:
SUBMITTAL REQUIREMENTS:	
<p>The PED Department is now accepting all applications electronically. Please submit your application online here or email the materials to plan&econ@cityofpoulsbo.com.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Application Fee (confirm with staff) <input type="checkbox"/> A “Notice of Intent” letter requesting annexation to Poulsbo, including justification for the annexation area proposed, and petition signatures meeting the requirements for the "direct petition method" proposed. <input type="checkbox"/> Vicinity map showing the proposed annexation boundary and Poulsbo city limits and Urban Growth Area in relationship to proposed annexation area. <input type="checkbox"/> A complete list of property owners in the proposed annexation area. <input type="checkbox"/> Utility drawing depicting potential utility service to the area. <input type="checkbox"/> Other information as determined by staff: 	

SIGNATURES:

I, the undersigned, state that, to the best of my knowledge, all the information provided in this application is true and complete. It is understood that the City of Poulsbo may nullify any decision made in reliance upon information given on this application form should there be any willful misrepresentation or willful lack of full disclosure on my part.

I hereby authorize City of Poulsbo representative(s) to inspect the subject property Monday-Friday between the hours of 8:00 am and 4:00 pm during this permit application process.

Signature of Applicant/Agent

Print Name of Applicant/Agent

STATE OF WASHINGTON)) SS
COUNTY OF KITSAP)

On this ____ day of _____, 20____ before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared _____ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she/they signed the same as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS my hand and official seal this _____ day of _____, 20_____.

NOTARY PUBLIC in and for the State of Washington Residing at

Commission Expires _____

PROPERTY OWNER'S SIGNATURE (if other than applicant/agent):

I, the undersigned, state that, to the best of my knowledge, all the information provided for this application is true and complete. It is understood that the City of Poulsbo may nullify any decision made in reliance upon information given on this application form should there be any willful misrepresentation or willful lack of full disclosure on my part.

Signature of Property Owner

Print Name of Owner

STATE OF WASHINGTON)) SS
COUNTY OF KITSAP)

On this _____ day of _____, 20____ before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared _____ to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she/they signed the same as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS my hand and official seal this _____ day of _____, 20_____.

NOTARY PUBLIC in and for the
State of Washington Residing at

Commission Expires _____