



DEPARTMENT OF COMMUNITY DEVELOPMENT

200 North Second Street
Saint Charles, MO 63301
636-949-3227
FAX 636-949-3557

VOLUNTARY ANNEXATION PETITION CONTIGUOUS PROPERTIES

To the City Council of the City of Saint Charles, Missouri:

The undersigned hereby petition(s) and request(s) the City Council of the City of Saint Charles, Missouri, to annex into the corporate limits of the City of Saint Charles, Missouri, any portion or part of the following tract of land, presently unincorporated contiguous to the corporate limits of the City of Saint Charles, Missouri.

ADDRESS OF PROPERTY: _____

PROPERTY ID NUMBER: _____

LEGAL DESCRIPTION OF THE PROPERTY MUST BE ATTACHED

The undersigned represent that they are owners of all fee interest of record of the above tract of land. This petition shall be a continuing obligation running with the land, and shall bind the subsequent owners, their heirs, executors, administrators, successors, assigns, or legal representatives. It is understood that this instrument will be recorded in the Recorder of Deeds, Office of Saint Charles County and shall be of record.

PROPERTY OWNER(S) *(Please print):*

(Name)

(Address)

(Phone / Fax)

(Email Address **REQUIRED**)

SIGNATURE OF OWNER(S):

_____ Date: _____

_____ Date: _____

Digital submittal of application preferred via PZ@stcharlescitymo.gov. Directions for digital submittal are attached to this application

INDIVIDUAL

STATE OF MISSOURI }
 }
COUNTY OF SAINT CHARLES }

On this _____ day of _____, 20_____, before me personally appeared _____, to me known to be the person(s) described in and who executed the foregoing instrument, and acknowledged that he/she/they executed the same as his/her/their free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal in the County and State aforesaid, the day and year first above written.

Notary Public

CORPORATION

STATE OF MISSOURI)
)
COUNTY OF)

On this ____ day of _____ in the year 20___, before me, _____, a Notary Public in and for the State of Missouri, personally appeared _____ (name of officer), _____, (title of person, member, president, vice president, etc.,) of _____ (name of licensee), known to me to be the person who executed the within Annexation Petition in behalf of said _____ (LLC, partnership, etc.) and acknowledged to me that he or she executed the same for the purposes therein stated.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal in the County of St. Charles and State of Missouri, the day and year first above written.

Notary Public

My Commission Expires:



DEPARTMENT OF COMMUNITY DEVELOPMENT

200 North Second Street, Suite 303
Saint Charles, MO 63301
636-949-3227 FAX 636-949-3557

APPLICATION FOR ESTABLISHING ZONING DISTRICT FOR NEWLY ANNEXED TRACT

CASE# (assigned by Staff): _____

PROPERTY OWNER OF RECORD:

(Name)

(Address)

(Phone / Fax)

APPLICANT:

(Name)

(Address)

(Phone / Fax)

(Email **REQUIRED**)

ADDRESS OF PROPERTY TO BE REZONED: _____

LEGAL DESCRIPTION OF THE PROPERTY MUST BE ATTACHED

REQUESTED ZONING DISTRICT: _____ **PRESENT COUNTY ZONING DISTRICT:** _____

REASON FOR REZONING REQUEST: _____

I (We), the undersigned, file this petition for a City Council action.
The above statements and the statements contained in all of the attached exhibits transmitted herewith are true, to the best of my knowledge.

Signature of applicant: _____ Date: _____

Owner's signature authorizing application: _____ Date: _____

Digital submittal of application preferred via PZ@stcharlescitymo.gov. Directions for digital submittal are attached.

Directions for Digital Submittal

1. Complete the applicable form for the requested review (forms may be found at the following link - <https://www.stcharlescitemo.gov/518/Forms>)
2. Attach the application and required plans and send to the email address below. If the attachments exceed 10mb, please provide information on location for file share download for staff.
 - PZ@stcharlescitemo.gov Planning and Zoning Commission (Rezoning, Annexations, Conditional Use Permit, Preliminary Plat, and Site Plans)
3. Once the email is sent, the Department will respond with an automatic email letting you know we have received the application and staff will contact you with applicable information on future agenda placement or if additional items are required. If you do not receive an automated response to your submittal email, please contact the Community Development Department at (636) 949-3222.
4. Submit application fee (if applicable) via mail to:
 - Department of Community Development
 - 200 North 2nd Street, Suite 303
 - St. Charles, MO 63301
5. Once received, staff will evaluate your request and provide comments (if any) via email with a deadline for re-submittal and provide directions for paper submittals for the Board/Commission packet.
6. After the submittal has been revised, email the applicable plan reviewer a digital copy and provide necessary paper copies as requested.