

CITY OF MUSCATINE, IOWA

APPLICATION OF VOLUNTARY ANNEXATION

Annexation Review Criteria:

Date: _____

Name: _____

Representative: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

I. Area Proposed for Annexation:

General Location: _____

Township(s) Location
of Area Proposed
for Annexation: _____

Attach Legal Description: _____

Provide Surveyed Map: _____

Total Acres: _____

Total Population: _____

II. Attach Statement of Intent (Briefly describe the reasons for requesting the annexation).

Existing Zoning: _____

Existing Land Uses: _____

Is any portion located in a flood zone?

Proposed Zoning: _____

Is Subdivision Proposed? _____

Adjacent Zoning: City _____

County _____

Adjacent Land Uses: _____

III. Access to Proposed Annexation:

Major Streets: _____

Rail: _____

River: _____

No Existing Access: _____

Proposed Access: _____

IV. Existing Available Utilities:

Water: _____

Sanitary Sewer: _____

Storm Sewer: _____

Electricity:

Municipal: _____

REC: _____

Natural Gas: _____

V. Proposed Utility Extensions: _____

VI. Existing Fire District: _____

VII. Total Number of Structures in Area Proposed for Annexation:

Agricultural Structures: _____

Residential Dwellings: _____

Commercial Structures: _____

Industrial Structures: _____

Other: _____

Total: _____

VIII. Total Assessed Value per County Assessor's Records:

Agricultural Structures: _____ Land _____

Residential Dwellings: _____ Land _____

Commercial Structures: _____ Land _____

Industrial Structures: _____ Land _____

Other: _____ Land _____

Total: _____

IX. Name and Mailing Addresses of Township Trustees of Area Proposed for Annexation:

Have Trustees of Township Been Notified of Proposal?

Additional information may be requested at the discretion of the Planning & Zoning Commission or City Council.

Application Fee: \$200.00