

DE-ANNEXATION APPLICATION

STAFF USE ONLY Date Submitted:	Received by:	Fee paid:	Project #	
REQUIRED SUBM	ITTALS		Application Fee: \$ 700.00 + Actual Cost of Surveyor Review**	
*Public Hearing with City	Council required	1		
A COMPLETE APPLICATION Planning Department located			I, as determined and accepted by the ing/application-forms.	
☐ Completed applicat	ion form			
Map: Conforming to S property for which De-A			mple), and legal description of the	
☐ Letter: Addressed to the Mayor and City Council stating the reason you are requesting De-Annexation from the City of Coeur d'Alene.				
☐ A legal description: in MS Word compatible format, together with a meets and bounds map stamped by a licensed Surveyor.				
☐ A vicinity map: To scale, showing property lines, thoroughfares, existing and proposed zoning, etc.				
for contiguity. The exist	ing city limits, the p		undaries including any linkages needed its of nearby cities, when appropriate and rd of Survey.	
APPLICATION INFORMATION				
Property Owner:				
Mailing Address:				
Сіту:		STATE:	ZIP:	
Phone:	Fax:	EMAIL:		
APPLICANT OR CONSULTANT:			STATUS: ENGINEER OTHER	
Mailing Address:				
Сіту:		STATE:	ZIP:	
PHONE:	Fax:	EMAIL:		

FILING CAPACITY					
Recorded property owner as to of					
☐ Purchasing (under contract) as of					
The Lessee/Renter as of					
Authorized agent of any of the fore	going, duly authorized in writing. (Writte	n authorization must be attached)			
SITE INFORMATION:					
PROPERTY LOCATION OR ADDRESS OF PROPE	RTY:				
EXISTING CITY ZONING (CHECK ALL THAT APPL	.y):				
R-1 □ R-3 □ R-5 □ R-8 □ R-12 □	R-17□ MH-8□ NC□ C-17□ C-171				
Tax Parcel #:	EXISTING ZONING:	ADJACENT ZONING:			
GROSS AREA/ACRES:	CURRENT LAND USE:	ADJACENT LAND USE:			
DESCRIPTION OF PROJECT/REASON FOR REQUEST:					
CERTIFICATION OF APPLICANT:					
I,, being duly sworn, attests that he/she is the applicant of this (Insert name of applicant)					
request and knows the contents the	ereof to be true to his/her knowledge.				
Signed:					
	<u></u>	licant)			
	(αρρ.	ilcarit)			
Notary to complete this section for	applicant:				
Subscribed and sworn to me before thisday of, 20					
Notary Public for Idaho Residing at:					
My commission expires:					
Signed:					
	(nota	ary)			

CERTIFICATION OF PROPERTY OWNER(S) OF RECORD:

considered in this application.	
Name:	Telephone No.:
Address:	
	Signed by Owner:
Notary to complete this section for all owners	of record:
Subscribed and sworn to me before this	day of, 20
Notary Public for Idaho Residing at:	
	My commission expires:
	Signed:
	(notary)

I have read and consent to the filing of this application as the owner of record of the area being

NOTIFICATION OF ADDITIONAL FEES:

^{*}For multiple applicants or owners of record, please submit multiple copies of this page.

^{**} A De-Annexation request requires review and verification of the map and legal description by a city-contracted surveyor. Applicant will be responsible for paying the cost of the city-contracted surveyor in addition to the application fee.

EXAMPLE OF DE-ANNEXATION MAP

