



PLANNING DEPARTMENT
Community Development Group

Date Stamp

APPLICATION SUBMITTAL CHECKLIST for Annexation

Case Number: _____

I acknowledge that the following items required for processing of my application are included as part of the submittal package for this application submitted to the City of Glendale Planning Department. I understand that the application will not be accepted unless all of the following items are included.

- | | | Required | | |
|----|--------------------------|--------------------------|----|---|
| | | Yes | No | |
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | | Completed Application |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | | Service Request (SR) Number: _____ SR _____ |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | | Applicant's Signature on Application |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | | Exhibit Map Highlighting Parcels Proposed for Annexation* |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | | Project Narrative |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | | Copy of Deed/Title (including Legal Description) |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | | FOLD ALL PLANS MARKED WITH AN * TO 9" X 12" |

Signature

Printed Name

Company

Date

If you have questions regarding the items on this checklist, contact your project planner.

Project Planner

Phone

Email Address

Revised: 10-04-06