



Community Development Department

**Planning Division
Annexation Application**

200 S MAIN • P.O. BOX 180 • OWASSO, OKLAHOMA 74055 • (918) 376-1500 • planning@cityofowasso.com

ANNEXATION APPLICATION

FOR OFFICE USE ONLY

Case Number:	
Date Received:	
PC Date:	
CC Date:	
Fees Paid (\$100.00 + \$3.00 per notice mailed)	

CONTACT INFORMATION

PROPERTY OWNER NAME(S):

PHONE:

OWNER EMAIL:

OWNER ADDRESS:

STREET

CITY

STATE

ZIP

APPLICANT(S) NAME:

PHONE:

(If different than owner)

APPLICANT EMAIL:

APPLICANT ADDRESS:

STREET

CITY

STATE

ZIP

PROPERTY INFORMATION

LEGAL DESCRIPTION: (Please provide digital copy as a Word document with application)

LOCATION/ADDRESS:

STREET

CITY

STATE

ZIP

AREA OF PROPERTY IN ACRES:

ARE THERE ANY SPECIAL DEED RESTRICTIONS ON THE PROPERTY?

Yes

No

If yes, please describe:



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ARE THERE ANY EASEMENTS ON THE PROPERTY? Yes No

If yes, please describe:

DOES THE PROPERTY ADJOIN THE CITY LIMITS? Yes No

If yes, on how many sides?

IS THIS PROPERTY PLATTED? Yes No

WHAT COUNTY IS THE PROPERTY CURRENTLY IN?

WHAT IS THE CURRENT COUNTY ZONING?

REQUESTED ZONING UPON ANNEXATION:

DESCRIBE THE CURRENT STREET CONDITIONS (If applicable):

IS THE PROPERTY CURRENTLY BEING SERVED WITH WATER? Yes No

WHAT WATER DISTRICT SERVES THE PROPERTY?

ARE SEWER LINES CURRENTLY AVAILABLE TO THE PROPERTY? Yes No

DISTANCE TO THE CLOSEST SANITARY SEWER LINE TO THE PROPERTY:

WHAT IS THE PROPOSED LAND USE FOR THE PROPERTY?

WHAT ARE THE CURRENT LAND USES ADJOINING THE SITE?

North: South:

East: West:



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PUBLICATION NOTICE

Who is the person that shall be billed for publication?

- | | | |
|--------------------|-----------------|-----------|
| Present Owner | Agent for Owner | Purchaser |
| Attorney for Owner | | Other |

MAILING ADDRESS:

STREET	CITY	STATE	ZIP
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PHONE:

EMAIL ADDRESS:

The individual checked above will be billed directly from the local newspaper for the advertising cost of the notice publication.

SUBMITTAL

The following items shall also be attached to or submitted with this application form:

- Property survey
- 300' certified radius report from a title or abstract company
- A certificate of closure from a licensed surveyor
- Legal description of the property
 - Submit a digital copy as a Word document to planning@cityofowasso.com
- Application fee of \$100.00 + \$3.00 per notice mailed

Please submit this completed application form with all required items to the Owasso [Planning Division](#). Applicants must submit a paper copy of all materials to Owasso City Hall **and** an electronic copy of all materials to planning@cityofowasso.com. Incomplete applications will not be accepted. Applications are due on or before the 1st of the month to be eligible for addition to that month's Technical Advisory Committee (TAC) meeting agenda. After review by the Technical Advisory Committee, the application is included on the agendas for the next Planning Commission and City Council meetings. The applicant or the applicant's representative must be in attendance at the Technical Advisory Committee, [Planning Commission](#), and [City Council](#) meetings when their case is on the agenda.

Please note that if the applicant is requesting a different zoning other than AG (Agriculture) or what the property is currently zoned in the county, than this application must be submitted concurrently with a Rezoning Application. The rezoning being sought by the applicant must comply with the [GrOwasso 2030 Land Use Master Plan](#).



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SIGNATURES

I, _____ (applicant name), hereby certify that the attached and completed application contains the information required by the City of Owasso as specified above. I understand the submission of incomplete and inaccurate information may result in a delay in processing and action on this application.

Signature of Applicant:

Date:

Signature of Property Owner:

Date:

The property owner must sign the application or it will not be processed.

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Staff Signature:

Date:

Staff Comments: