



DE-ANNEXATION APPLICATION

Town of Wheatland
600 9th Street
Wheatland, Wyoming 82201
307-322-2962 Fax: 307-322-2968

| Office Use Only | |
|------------------------|------------------|
| Application Fee: | \$500.00 |
| Publication Fee: | \$350.00 |
| Certified Mailing Fee: | \$ _____ . _____ |
| Ordinance Publication: | \$ _____ . _____ |
| Date Received: | |

All Applications Must Include the Following:

- Application:** Fill out the application form completely.
- Fees:** All applicable fees; i.e.: application fee, advertising fee, certified mailing fee. Check or Cash only.
- Proof of Ownership:** A copy of the deed, lease, or contract for deed as proof of ownership.
- Site Plan:** Submit a complete site plan.
- Vicinity Map:** Map showing the surrounding area with the subject area highlighted.
- Legal Description:** A recent survey certified by a Wyoming registered land surveyor, for unplatted lands. A Lot and Block legal description is acceptable for platted lots.
- Neighbor List:** Legal names and addresses of all property owners within a distance of one hundred forty (140) feet.
- Petition/Letter of Justification:** to include the following-
 - Justification for the de-annexation
 - What is the availability and adequacy of public facilities (i.e.: sewer, water, fire, streets) needed to serve any and all uses allowed on this property under the proposed zone?
 - How is the proposed zone compatible with the surrounding area?
- Digital Copies:** As part of a completed application, digital copies of all materials are required. Digital submission should be in PDF format and shall be sent to the Planning Office via email *prior to or at the same time* as the submittal appointment. Any and all easements, rights-of-way, streets or other property improvements within the area to be de-annexed shall be included on the site plan.
 - AutoCAD / ArcMap Digital Drawings:* AutoCAD and ArcMap files are *not* required at filing. AutoCAD compatible digital file and/or an ArcMap GIS 9.0 or greater compatible digital file shall be provided prior to final approval of the final plat.

Incomplete Applications will be returned

Applicant Name: _____

Phone No.: _____

Mailing Address: _____

E-mail: _____

*Application **MUST** include e-mail addresses or application will be considered incomplete.*

If the applicant is other than the owner of the property for which this building PERMIT is being sought, the applicant must provide separate written approval from the owner or the owner may indicate approval by signing below.

| |
|-----------------------------|
| Property Owner (as on deed) |
| Mailing Address |
| City, State, Zip Code |

| |
|-----------|
| Phone No. |
| E-mail |
| Signature |

Proof of ownership must be provided.

LETTER OF AUTHORIZATION

This letter shall serve to notify and verify that I am / we are the legal owner(s) of the property being considered under this application, and do hereby authorize the below applicant(s) and representatives(s) to file and represent my / our interest in this application.

I am / we are the legal owner(s) of said property; have read this "Letter of Authorization" and know the contents thereof; and so hereby certify (or declare) under penalty of perjury under the laws of the State of Wyoming that the information contained in this application is true and correct.

OWNER(S) OF RECORD: (All owners of record *must* sign; provide extra sheets if necessary.)

| | | |
|------------|-----------|------|
| Print Name | Signature | Date |
| Print Name | Signature | Date |
| Print Name | Signature | Date |

I certify under penalty of perjury that I am the applicant and that the foregoing statements and answers contained herein and the information herein submitted, are in all respects true and correct. I grant permission to Town staff and officials to enter the property to conduct inspections / site visits necessary for the review of the project.

APPLICANT (LLCs, Corporations and Partnerships shall identify an officer as the primary contact):

| | | |
|------------|-----------|------|
| Print Name | Signature | Date |
| Print Name | Signature | Date |

APPLICANT'S REPRESENTATIVE:

| | | |
|------------|-----------|------|
| Print Name | Signature | Date |
|------------|-----------|------|

De-Annexation Location:

Is the property located within a floodplain?

Yes No

Floodplain information can be found at: msc.fema.gov

Acreage: _____

Number of Lots: _____

Assessor's Property ID Numbers:

Current Land Use District:

Current Land Use:

Proposed Land Use District:

Proposed Land Use:

APPLICATION SIGNATURES AND ACCESS PERMISSION

Right to ingress property for assessment, evaluation and inspections.

I, the undersigned, hereby grant authorized Town of Wheatland and Platte County personnel the right to enter onto this said land/property for any and all inspection purposes necessary to collect information in relation to this De-annexation application. I certify, to the best of my knowledge, that all the information in this application is true and correct, and that I am the owner of the above described property or have been authorized by the owner to make this application as his/her agent.

Signature of Applicant (s)

Date

IMPORTANT INFORMATION

In addition to the application fee; the certified mailing postage and ordinance publication fees shall be paid by the applicant. The applicant is responsible for publishing meeting notices in the Record Times and providing the Planning office with a copy of each publication's Affidavit of Publication.

Proof of Ownership can include one of the following: Deed, Title Policy, Contract for Deed, and/or notarized authorization letter from the owner if other than the applicant. If the landowner is an entity, verification of authority to sign for the entity is also required.

Notice of Public Hearing shall contain the applicant/landowner(s) names, address of the property if one has been assigned, legal description of the land to be de-annexed, date of meetings, location of meetings, time of meetings, and a map showing identifiable landmarks and boundaries.

Planning Office Use Only

Date Complete Application Received: _____

County Commissioner Hearing Date: _____

Approval *Disapproval*

Planning and Zoning Commission Hearing Date: _____

Approval *Disapproval*

Town Council Hearing Date: _____

Approval *Disapproval*

Ordinance Number (if approved) _____

Ordinance 1st Reading: _____

Ordinance 2nd Reading Date: _____ *Ordinance 3rd Reading Date:* _____