

**CITY OF AVONDALE ESTATES, GEORGIA**  
**21 North Avondale Plaza**  
**Avondale Estates, Georgia**  
**(404) 294-5400**

**APPLICATION FOR ANNEXATION**

Tax Map Number: \_\_\_\_\_ Date: \_\_\_\_\_

Date Annexation will become effective and official: \_\_\_\_\_

Address of subject property: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Housing Units: \_\_\_\_\_ Other Buildings: \_\_\_\_\_

Current Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Population: \_\_\_\_\_

Application must include the following:

- A. If the owner and the applicant are not the same, please complete an Authorization by Property Owner Form.
- B. Certified Site Plan – Showing the location of existing buildings and other improvements.
- C. Property Description – A legal description and plat.
- D. Petition Requesting Annexation.
- E. Authorization to Inspect Premises – I hereby authorize the City of Avondale Estates, City Manager, Code Enforcement Officer, and/or staff to inspect the premises which is the subject of this annexation application.

\_\_\_\_\_  
Signature

**CITY OF AVONDALE ESTATES, GEORGIA**  
**21 North Avondale Plaza**  
**Avondale Estates, Georgia**  
**(404) 294-5400**

**AUTHORIZATION BY PROPERTY OWNER FOR ANNEXATION**

I Swear That I am The Owner Of The Property Which Is The Subject Matter Of The Attached Application, As Is Shown In The Records Of Dekalb County, Georgia. I Authorize The Person Named Below To Act As Applicant In The Pursuit of An Annexation Request Of This Property.

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_