



**City of The Dalles**  
**Community Development Department**  
 313 Court Street  
 The Dalles, OR 97058  
 (541) 296-5481, ext. 1125  
 www.thedalles.org

Application #: \_\_\_\_\_  
 Filing Fee: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_  
 Deemed Complete: \_\_\_\_\_  
 Ready to Issue: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_

Received: \_\_\_\_\_

## Annexation Property Owner Application

**Applicant**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Legal Owner (if different than Applicant)**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Property Information**

Address: \_\_\_\_\_  
 Zone/Overlay: \_\_\_\_\_  
 Describe current use of property:

Map and Tax Lot: \_\_\_\_\_  
 Contiguous to current City Limits:      Yes      No

Reason for requesting annexation:

Signature of Applicant(s)/Owner(s)

\_\_\_\_\_  
 \_\_\_\_\_

Signature of Property Owner(s) or Agent

\_\_\_\_\_  
 \_\_\_\_\_

**Decision**

Approved

Denied

Community Development Department

Public Works

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date