

City of Lake Alfred  
120 E. Pomelo Street  
Lake Alfred, FL 33850



Phone: (863) 291-5748

[www.mylakealfred.com](http://www.mylakealfred.com)

**Community Development**

Building | Code Enforcement | Planning | Zoning

**Annexation Petition/Consent**

The following information is required to process an application to annex into the City of Lake Alfred.

Property Address or General Location: \_\_\_\_\_

Parcel I.D.#: \_\_\_\_\_

Present Use of Property: \_\_\_\_\_ Existing Structure (#) \_\_\_\_\_

(I) / (We), being duly sworn depose and affirm that (I) / (we) own the properties involved in this petition and that (I) / (we) authorize the City of Lake Alfred to process this petition/consent in accordance with all adopted City rules and regulations, and in conformance with State law to and annex said property into the corporate limits of the City of Lake Alfred. This Petition and Consent shall be irrevocable. No further consent of Owner shall be required for the City to annex said property immediately, or in the future. Further, (I) / (we) file this petition and depose that the statements contained in this petition and information attached thereto are in all respects true and correct to the best of (my) / (our) knowledge and belief.

Required Attachments:            Legal Description             Deed or proof of ownership

\_\_\_\_\_  
Owner's Signature/                      /                      Print Title

\_\_\_\_\_  
Owner's Signature/                      /                      Print Title

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Printed Name of Owner

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Email:

\_\_\_\_\_  
Email:

\_\_\_\_\_  
Phone #:

\_\_\_\_\_  
Phone #:

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

**OATH OR AFFIRMATION**

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (owner(s) listed above). Personally Known  or Produced Identification .

\_\_\_\_\_  
Print or Stamp Name of Notary (SEAL)

\_\_\_\_\_  
Signature of Notary Public – State of Florida