

APPLICATION

Petition for proceedings pursuant to the Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000

The undersigned hereby petition the Local Agency Formation Commission of Imperial County for approval and stipulate as follows:

OWNER		
NAME:	AGENCY:	
MAILING ADDRESS:	PHONE:	
	EMAIL:	
APPLICANT (IF DIFFEREN	IT FROM THE OWNER)	
NAME:	AGENCY:	
MAILING ADDRESS:	PHONE:	
	EMAIL:	
TERRITORY(IES) INFORMATION		
ADDRESS:		
APN(S):		
TOTAL LAND AREA (ACRES):		
THE TERRITORY(IES) IS/ARE WITHIN THE SPHERE OF INFLUENCE: YES NO		
THE TERRITORY(IES) IS/ARE: UNINHABITED DEVELOPED DIVIDED (10.00 MODE DECICE DED.)		
☐ INHABITED (12 OR MORE REGISTERED VOTERS) ☐ UNDEVELOPED		
EXISTING ZONING:		
PROPOSED ZONING:		
BEEN PRE-ZONED? ☐ YES ☐ NO	DEING DDE ZONEDO	
PRE-ZONED DATE:	BEING PRE-ZONED? ☐ YES	
CLASSIFICATION:	□ NO	
EXISTING LAND USE(S):		
PROPOSED LAND USE(S):		
THE TERRITORY(IES) IS/ARE CONTIGUOUS TO T	HE CITY/DISTRICT:	

PROPOSAL(S) AND/OR REQUEST(S)	
PROPOSED CHANGE(S) OF ORGANIZATION PURSUANT TO SECTIONS COMMENCING WITH 56650:	REQUEST EXTENSION OF SERVICE(S) PURSUANT TO SECTION 56133:
	SERVICE(S) REQUESTED:
☐ ANNEXATION ☐ DETACHMENT	
☐ CONSOLIDATION☐ MERGER OF A CITY & DISTRICT☐ ESTABLISHMENT OF SUBSIDIARY DISTRICT	REQUEST EXTENSION OF SERVICE PURSUANT TO SECTION 56134:
	☐ FIRE PROTECTION
CITY: ☐ DISINCORPORATION ☐ INCORPORATION	REQUEST AMENDMENT PURSUANT TO SECTION 56425-56430:
DISTRICT: □ DISSOLUTION □ FORMATION	☐ SPHERE OF INFLUENCE
☐ THE EXERCISE OF NEW OR DIFFERENT FUNCTIONS OR CLASSES OF SERVICES, OR DIVESTITURE OF THE POWER TO PROVIDE	REQUEST REVIEW PURSUANT TO SECTIONS 56425-56430:
PARTICULAR FUNCTIONS OR CLASSES OF SERVICES, WITHIN ALL OR PART OF THE JURISDICTIONAL BOUNDARIES OF A SPECIAL DISTRICT	☐ SERVICE AREA PLAN
-	HE FOLLOWING
PLEASE ANSWER THE FOLLOWING	
DESCRIBE YOUR PROPOSAL(S) AND/OR REQUEST(S) IN DETAIL:	
PLEASE DESCRIBE IN DETAIL THE REASON(S) FOR YOUR PROPOSAL(S) AND/OR REQUEST(S):	
IS/ARE YOUR PROPOSAL(S) AND/OR REQUEST(S) SUBJECT TO ANY TERMS AND CONDITIONS? YES NO	
PLEASE SPECIFY:	
NAME OF AGENCY(IES) BEING AFFECTED BY YOUR PROPOSAL(S) AND/OR REQUEST(S):	
WOULD YOU LIKE TO DESIGNATE A TI'S REQUEST(S)? YES NO	TLE FOR YOUR PROPOSAL(S) AND/OR
TITLE:	

6	IS THERE A GOOD LIKELIHOOD OF A SIGNIFICANT INCREASE IN POPULATION IN THE SUBJECT AREA WITHIN THE NEXT TEN YEARS? IN UNINCORPORATED AREAS? YES NO IN INCORPORATED AREAS? YES NO ESTIMATED ADDITIONAL POPULATION:
	WHAT IS THE PLANNED GENERAL PLAN DESIGNATION OF THE AREA BY THE AFFECTED AGENCY?
7	ARE THERE ANY SPECIAL LAND USE CONCERNS? YES NO
	PLEASE SPECIFY:
8	DOES THIS APPLICATION CONTAIN 100% WRITTEN CONSENT OF EACH PROPERTY OWNER IN THE SUBJECT TERRITORY? YES NO
	IF PROPOSING AN ANNEXATION / DETACHMENT:
9	A. WILL THE TERRITORY BE LIABLE FOR ITS SHARE OF EXISTING BONDED INDEBTEDNESS? ☐ YES ☐ NO
	B. WILL THE TERRITORY BE INCLUDED WITHIN ANY PARTICULAR TAX DIVISION OR ZONE? ☐ YES ☐ NO
	PLEASE SPECIFY:
	C. WOULD AN ISLAND OF UNINCORPORATED TERRITORY BE CREATED? ☐ YES ☐ NO
	PLEASE EXPLAIN:
10	IF PROPOSING A CONSOLIDATION, WHAT IS THE PROPOSED NAME?
	IF PROPOSING AN INCORPORATION OF A CITY:
11	A. WHAT IS THE PROPOSED NAME FOR THE CITY?
	B. NAME OF PERSON APPOINTED AS: 1. INTERIM CITY MANAGER:
	2. INTERIM CITY CLERK:
	IF PROPOSING THE FORMATION OF A DISTRICT:
12	A. WHAT IS THE PRINCIPAL ACT THAT SAID DISTRICT MAY BE FORMED?
	B. WHAT IS THE PROPOSED NAME OF THE NEW DISTRICT?

	IF REQUESTING A SERVICE AREA PLAN REVIEW:
	A. DATE OF PREVIOUS SERVICE AREA PLAN REVIEW:
40	B. WAS THE SPHERE OF INFLUENCE UPDATED AT THE TIME OF THE PREVIOUS SERVICE AREA PLAN REVIEW? ☐ YES ☐ NO
13	C. DATE THE LAST TIME THE SPHERE OF INFLUENCE WAS AMENDED:
	D. DOES THE CURRENT SERVICE AREA PLAN PROPOSE A SPHERE OF INFLUENCE AMENDMENT? YES NO
	IF REQUESTING A SPHERE OF INFLUENCE AMENDMENT:
	A. NAME OF AGENCY(IES) TO BE AMENDED:
	B. WHAT IS THE NATURE OF THE PROPOSED AMENDMENT?
	C. WHAT IS THE REASON FOR THE REQUEST?
	D. WHAT ARE THE PROPOSED TERMS OR CONDITIONS?
14	E. NAME OF OTHER AGENCY(IES) BEING AFFECTED:
	HOW?
	WHY?
	F. CURRENT SPHERE OF INFLUENCE SIZE:
	G. PROPOSED SHPHERE OF INFLUENCE SIZE:
	H. CURRENT UNDEVELOPED LAND SIZE WITHIN THE SPHERE OF INFLUENCE:
	I. DESCRIBE THE LAND USE(S) WITHIN THE PROPOSED AREA:
15	LIST ANY DOCUMENTS BEING SUBMITTED WITH THIS APPLICATION THAT ARE NOT LISTED IN ITEM 16:

	AS REQUIRED, THE FOLLOWING ITEMS ARE ENCLOSED WITH THIS APPLICATION:	
	FEE/DEPOSIT \$	
	INDEMNIFICATION AGREEMENT LEGAL BOUNDARY DESCRIPTION ANNEXATION / DETACHMENT MAP PROJECT LOCATION MAP VICINITY MAP PROTEST WAIVER LETTER HERE OF INFLUENCE AMENDMENT:	□ SPHERE OF INFLUENCE MAP□ SERVICE AREA PLAN□ CEQA ANALYSIS□ FEASIBILITY STUDY
	SERVICE AREA PLAN	EXTENSION OF SERVICE(S): INDEMNIFICATION AGREEMENT
		IF OUTSIDE THE SPHERE OF INFLUENCE: ☐ AGENCY DOCUMENTATION OF A THREAT TO HEALTH & SAFETY
THE EXERCISE OF NEW OR DIFFERENT FUNCTIONS OR CLASSES OF SERVICES, OR DIVESTITURE OF THE POWER TO PROVIDE PARTICULAR FUNCTIONS OR CLASSES OF SERVICES, WITHIN ALL OR PART OF THE JURISDICTIONAL BOUNDARIES OF A SPECIAL DISTRICT: INDEMNIFICATION AGREEMENT PROTEST WAIVER LETTER FEASIBILITY STUDY FINANCIAL ANALYSIS SERVICE AREA PLAN		
PEOPLE REQUESTING DOCUMENTS (OTHER THAN THE OWNER / APPLICANT)		
PERSON 1 REQUEST(S): □ PUBLIC NOTICE OF HEARING □ EXECUTIVE OFFICER'S REPORT		
NAME:		AGENCY:
MAILING	ADDRESS:	PHONE:
		EMAIL:
PERSON 2	REQUEST(S): ☐ PUBLIC NOTICE OF HEARING	☐ EXECUTIVE OFFICER'S REPORT
NAME:		AGENCY:
MAILING ADDRESS:		PHONE:
		EMAIL:
PERSON 3	REQUEST(S): ☐ PUBLIC NOTICE OF HEARING	☐ EXECUTIVE OFFICER'S REPORT
NAME:	-	AGENCY:
MAILING ADDRESS:		PHONE:
		EMAIL.

CHIEF PETITIONERS		
Wherefore, petitioner(s) request(s) that proceedings be taken in accordance with the provisions of Section 56000, et seq. of the Government Code and herewith affix signature(s) as follows:		
PERSON 1	THE PERSON SIGNING THIS PETITION (CHECK ONLY ONE) REGISTER	ON HAS SIGNED AS: ED VOTER □ OWNER OF LAND
NAME:		DATE:
RESIDEN	CE ADDRESS:	
		OLONIA TUDE
	THE BEROOM SIGNING THIS BETITIO	SIGNATURE
PERSON 2	THE PERSON SIGNING THIS PETITIC (CHECK ONLY ONE) ☐ REGISTERI	
NAME:		DATE:
RESIDEN	CE ADDRESS:	
		SIGNATURE
PERSON 3	THE PERSON SIGNING THIS PETITIC (CHECK ONLY ONE) ☐ REGISTERI	
NAME:		DATE:
RESIDENCE ADDRESS:		
		SIGNATURE
NOTE: Prior to the effective date of any jurisdictional change (i.e., annexation, detachment, etc.), the governing bodies of all agencies whose service areas or service responsibilities would be altered by such change shall meet to determine the amount of property tax revenues to be exchanged between and among such affected agencies. Notwithstanding any other provisions of law, no such jurisdictional change shall become effective until each county and city included in such negotiation agrees, by Resolution, to accept the negotiated exchange of property tax revenues.		
	SIGNATURE NT SIGNATURE	DATE
APPLICAN	NI SIGNATURE	DATE

FOR LAFCO USE ONLY

CHECK THE DOCUMENTS SUBMITTED WITH THE APPLICATION:		
□ FEE/DEPOSIT \$		
ANNEXATION / DETACHMENT: INDEMNIFICATION AGREEMENT LEGAL BOUNDARY DESCRIPTION ANNEXATION / DETACHMENT MAP PROJECT LOCATION MAP VICINITY MAP PROTEST WAIVER LETTER SPHERE OF INFLUENCE AMENDMENT: INDEMNIFICATION AGREEMENT	OTHER CHANGE OF ORGANIZATION: INDEMNIFICATION AGREEMENT BOUNDARY MAP LEGAL BOUNDARY DESCRIPTION SPHERE OF INFLUENCE MAP SERVICE AREA PLAN CEQA ANALYSIS FEASIBILITY STUDY FINANCIAL ANALYSIS PROTEST WAIVER LETTER	
SERVICE AREA PLAN REVIEW: SERVICE AREA PLAN LAST ADOPTED AUDIT LAST ADOPTED BUDGET	EXTENSION OF SERVICE(S): INDEMNIFICATION AGREEMENT IF OUTSIDE OF THE SPHERE OF INFLUENCE: AGENCY DOCUMENTATION OF A THREAT TO HEALTH & SAFETY	
THE EXERCISE OF NEW OR DIFFERENT FUNCTIONS OR CLASSES OF SERVICES, OR DIVESTITURE OF THE POWER TO PROVIDE PARTICULAR FUNCTIONS OR CLASSES OF SERVICES, WITHIN ALL OR PART OF THE JURISDICTIONAL BOUNDARIES OF A SPECIAL DISTRICT: INDEMNIFICATION AGREEMENT PROTEST WAIVER LETTER FEASIBILITY STUDY FINANCIAL ANALYSIS SERVICE AREA PLAN		
APPLICATION RECEIVED BY	DATE RECEIVED	
ID # ASSIGNED	DATE ACCEPTED	