Application for
Annexation Application

ANX
2/09

City of Rockville
Department of Planning and Development Services

111 Maryland Avenue, Rockville, Maryland 20850
Phone: 240-314-8200 • **Fax:** 240-314-8210 • **E-mail:** pds@rockvillemd.gov • **Web site:** www.rockvillemd.gov

Please Print Clearly or Type

Property Address Information _____

Subdivision _____ Lot (S) _____ Block _____

Zoning _____ Tax Account (S) _____ , _____ , _____

Property Size (in square feet) _____

Property's Use Existing (to include office, industrial, residential, commercial) _____

Applicant Information:
Please supply Name, Address, Phone Number and E-mail Address

Applicant _____

Property Owner _____

Architect _____

Engineer _____

Attorney _____

Property Current Zoning In Montgomery County _____

STAFF USE ONLY

Application Acceptance: **Application Intake:**

Application # _____ OR Date Received _____

Date Accepted _____ Reviewed by _____

Staff Contact _____ Date of Checklist Review _____

Deemed Complete: Yes o No o

Project Name _____

Metes and Bonds Description _____

_____

_____

_____

A letter of authorization from the owner must be submitted if this application is filed by anyone other than the owner.
I hereby certify that I have the authority to make this application, that the application is complete and correct and that I have read and understood all procedures for filing this application.

Please sign here _____

Application Checklist:
The following documents are to be furnished as part of this application:

Submitted

- Complete Application
- Filing Fee
- Petition
- Metes and Bonds description and graphic plan prepared and certified by a professional engineer. Twelve (12) copies: (size 8.5 x 11, 11x14, or 11x17)
  - Electronic Copy

Comments on Submittal: (For Staff Use Only)

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ANX