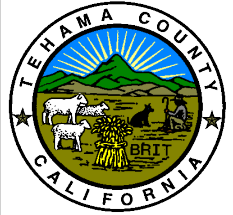


TEHAMA LOCAL AGENCY FORMATION COMMISSION

444 Oak Street, Room "1", Courthouse Annex Second Floor
Red Bluff, California 96080
Telephone (530) 527-2200 Fax (530) 527-2655 Email: planning@co.tehama.ca.us

LAFCO CHECKLIST & APPLICATION



1. + LAFCo Application Fee \$2,626.00 (Make Check payable to Tehama LAFCo)
2. + Completed Application (Must be Notarized)
3. + Written Geographic Description(s) of the Project Area(s) (must be in Meets & Bounds – refer to instructions attached Page 3). **Provide (8) eight copies.**
4. + Vicinity Map (with district boundary shown and identified)
5. + City Resolutions/Pre-Zone (if required)
6. + Check made payable to State Board of Equalization (amount to be determined at time of filing of the application as the fee is based on acreage. Check will be held until approval of the application and will accompany the “Statement of Boundary Change” to the SBE.
7. + Check made payable to Tehama County Clerk Recorder (amount to be determined at time of filing of the application as fee is based on the number of pages to be recorded with “Certificate of Completion”.)
8. + Additional information as deemed if necessary by the Executive Officer.

COUNTY OF TEHAMA LAFCo

APPLICATION FOR INITIATION OF PROCEEDINGS AND QUESTIONNAIRE

Petition No. _____

Date _____

TO: Tehama Local Agency Formation Commission
Courthouse Annex
444 Oak Street, Room I
Red Bluff, CA 96080

Application Fee: \$2,626.00

Receipt # _____

FROM:

Name Phone #

Address, City, State, Zip

1. The undersigned hereby applies for the initiation of proceedings before the Tehama Local Agency Formation Commission under the provisions of Division 3 (commencing with Section 56000) of the Cortese-Knox Local Government Reorganization Act of 2000, amended November 2004.

APPLICATION IS MADE FOR A PROPOSAL TO:

- | | |
|---|---|
| <input type="checkbox"/> Annex to an existing city | <input type="checkbox"/> Create a new district |
| <input type="checkbox"/> Detach from an existing city | <input type="checkbox"/> Annex to a district |
| <input type="checkbox"/> Incorporate a new city | <input type="checkbox"/> Detach from a district |
| <input type="checkbox"/> Amend Sphere of Influence | |

APN(s): _____

NOTE: Legal Description of All Parcels Required With Application Submittal

2. The name or proposed name of the city or district to which territory is proposed to be annexed, from which territory is proposed to be detached, or which is proposed to be created is:

3. Statutory Provisions Governing Proceedings:

4. General Description of Property:

- a. Land Area: Square Miles _____ Acres _____
- b. Describe property characteristics & uses: _____

- c. Number & type of buildings on property: _____

- d. Description of general terrain & vegetation: _____

- e. Name of access road to property _____
- f. Public or Private Road? _____
- g. Describe surrounding properties: _____

5. Water and Sewage:

- a. Type of sewage disposal: _____
- b. Type of water service: _____

6. What districts or political subdivisions does this proposal affect?

7. If this proposal involves districts or political subdivisions, how will the final action on this petition affect any existing tax rates?

8. Total Assessed Valuation: _____

9. Population and Tax Revenue: _____

- a. Subject Area: _____
- b. Number of Registered Voters: _____
- c. Number of Dwelling Units: _____
- d. How many Commercial Enterprises: _____
- e. Estimated Local Sales Tax Revenue: _____

10. Present Zoning Classification: _____

- a. Describe proposed new zoning or changes in zoning, if any:

11. Do any flood control or soil erosion problems exist? _____ If so, what steps will be taken to correct the situation?

12. Present Soil Classification: _____

13. If the area proposed for action is populated, what is the reaction of those persons to this petition?

FILING INSTRUCTIONS:

Eight (8) copies each of a map and legal description of the specific boundaries of the territory involved in this proposal are to be attached hereto and made a part of this petition, together with all other required forms. The appropriate fee must accompany this application to cover processing costs. Copies of the Executive Officer's report, mailed notice of any public hearing regarding the proposal, and any other communication regarding this proposal, should be directed to:

Name Signature

Address Phone #

Name Signature

Address Phone #

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of the document.

STATE

OF CALIFORNIA)

COUNTY OF TEHAMA)ss
)

On _____, before me _____, a Notary Public, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)

Signature _____ (Seal)