

**ANNEXATION APPLICATION
COMMUNITY FACILITIES DISTRICT NO. 2020-1
(SERVICES)**



Proposed Name of Project: _____

For Internal Use Only:	
Date Received:	Proposed Annexation Number:

FEE REQUIREMENT

There is a \$XXX.00 Flat Fee to process the annexation that must be submitted to complete the Annexation Application.

1. IDENTIFICATION OF SUBJECT PROPERTY

A. Description of Property (include address or bordering streets if no address has been assigned.)

B. ASSESSOR PARCEL NUMBER(S) AND ACRES
Attach a separate sheet if required.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. Tract / Tentative Tract Map Number
Enclosed reduced size copy of map.

D. Mapping Status Approved Tentative

E. Status of Permits _____

F. Projected First Occupancy _____

2. PROPERTY OWNER INFORMATION

Attach a title report that is less than 30 days old to allow verification of ownership.

A. Owner Name(s) _____

B. Contact Name _____

C. Title _____

D. Mailing Address _____

E. Phone _____

F. Email _____

3. CONSULTANT/APPLICANT INFORMATION (If different than above)

A. Company Name _____

B. Contact Name _____

C. Title _____

D. Mailing Address _____

E. Phone _____

F. Email _____

4. PROJECT LAND USE

A. Number of Taxable Units _____

B. Proposed Type of Unit(s) _____

C. Proposed Product Mix _____

D. General Plan Land Use _____

Attachment:

- > Title Report less than 30 days old.

Submit Application / Direct Questions:

- > Rajesh Badri
rbadri@escondido.org
P: 760-839-4665