



Application for Annexation

1. This application for annexation must be completed in full and returned to the address below before said application will be advertised for public hearing.
City of Belton
PO Box 828
Belton, SC 29627
2. A deed and property plat must accompany this application and all data and exhibits found herein or appended to this application shall be deemed to be public record.
3. Additional information may be required by the Belton Zoning Committee.
4. A signed annexation petition must accompany the annexation application.

Property Owner Information:

Owner Name: _____

Mailing Address: _____

Contact Number: _____

Applicant Information (if different from owner):

Applicant Name: _____

Mailing Address: _____

Contact Number: _____

Property Information:

Location Address: _____

TMS# _____

Property Characteristics:

Describe:

Property Size:

_____ feet x _____ feet _____ acres

Requested Zoning:

Current use of property:

Proposed use of property:

Reasons for request:

(attach supporting
information if applicable)

The Undersigned represents that he/she is _____
(owner/authorized representative) in the foregoing applications and that no person other than
those identified as the owner and/or applicant has an interest in the property which is the subject
of this application.

Signature

Date

Given under my hand and Seal

This _____ day of
_____, 20____.

Notary Public for South Carolina