

**APPLICATION TO ANNEX TO THE CITY OF HOLLISTER
COMMUNITY FACILITIES DISTRICT NO. 4**

APPLICANT

(Developer or Project Manager)

PROPERTY OWNER / AUTHORIZED VOTER

(if different from Applicant, legal ability to sign Petition)

Name: _____

Name: _____

Title: _____

Title: _____

Mailing Address: _____

Mailing Address: _____

Phone Number: _____

Phone Number: _____

Cell Number: _____

Cell Number: _____

Email Address: _____

Email Address: _____

PROJECT INFORMATION

Assessor's Parcel Number: _____

Tract No (Please attach current maps): _____

Project Title/Subdivision Name: _____

Street Address/Location of Project: _____

Number of Lots / Residential Units: _____ / _____

Total Acreage of Property to be Annexed: _____

SEND THIS FORM TO (you may scan this form and email it to the email address below):

City of Hollister
Public Works Department
Attention: Dillon Albert
339 Fifth Street, Hollister, CA 95023
Questions? Contact Dillon Albert at (831) 636-4340 or email: dillon.albert@hollister.ca.gov

PAYMENT OF ANNEXATION FEE:

- Major Subdivision (Residential Projects with 5 or more residential units)
 - Please send the annexation fee in the amount of \$6,977.36 + \$21.84 per residential unit payable to the City of Hollister. (\$9,003.28 maximum total)
- Minor Subdivision (Projects with 4 or fewer residential units)
 - Please send the annexation fee in the amount of \$3,173.04 + \$21.84 per residential unit payable to the City of Hollister.
- Commercial/Industrial Projects
 - Please send the annexation fee for \$3,173.71, payable to the City of Hollister.
- Send the annexation fee to the City address above and reference the project on the memo line.

The information provided in this application is true and correct and I hereby request the annexation of the above-defined property to the City of Hollister Community Facilities District No. 4.
(Authorized Representative of Applicant)

Signed: _____ Date: _____

Printed Name and Title: _____