

STATE OF ILLINOIS )  
 ) SS.  
COUNTY OF WILL )

**BEFORE THE MAYOR AND CITY COUNCIL  
OF THE CITY OF JOLIET, ILLINOIS**

**PETITION FOR ANNEXATION TO THE CITY OF JOLIET**

Pursuant to Section 7-1-8 of the Illinois Municipal Code, the undersigned being duly sworn, states on oath as follows:

1. The undersigned is duly authorized by law to execute and file this Petition for Annexation.
2. The undersigned is the owner of record of all of the land within the territory described in Exhibit "A" ("Territory"), attached hereto and incorporated herein by reference.
3. The undersigned constitutes at least 51% of the electors residing within the Territory, if any.
4. The Territory is not within the corporate limits of any municipality.
5. The undersigned requests the annexation of the Territory to the City of Joliet, Illinois, together with that portion of any highway adjoining the Territory, which is not within any municipality.

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**PETITIONER**

Subscribed and Sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**

CASE NO. \_\_\_\_\_  
DATE FILED \_\_\_\_\_

ANNEXATION INFORMATION SHEET

(PLEASE PRINT CLEARLY)

**I. Applicant's information:**

NAME OF APPLICANT(S):

_____	_____	_____	_____
FN	(MI)	(LN)	(Suffix)
_____	_____	_____	_____
FN	(MI)	(LN)	(Suffix)

_____	_____	_____	_____
HOME ADDRESS (include Suite, Apt. No.)	CITY	STATE	ZIP CODE
_____	_____	_____	_____
BUSINESS ADDRESS	CITY	STATE	ZIP CODE

CONTACT NUMBERS:

(H) (\_\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_\_) \_\_\_\_\_ CELL (\_\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**II. Owner's information:**

NAME OF OWNER(S): (If property ownership is in the name of a partnership, corporation, joint venture, trust or other entity, please list the official name of the entity and the name of the managing power.)

_____	_____	_____	_____
FN	(MI)	(LN)	(Suffix)
_____	_____	_____	_____
FN	(MI)	(LN)	(Suffix)

_____	_____	_____	_____
HOME ADDRESS (include Suite, Apt. No.)	CITY	STATE	ZIP CODE
_____	_____	_____	_____
BUSINESS ADDRESS	CITY	STATE	ZIP CODE

CONTACT NUMBERS:

(H) (\_\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_\_) \_\_\_\_\_ CELL (\_\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**In case of a land trust, attach a sheet with the name, address and telephone numbers of all trustees and beneficiaries of the trust.**

**III. Agent Authorization:**

Please check one of the following:

\_\_\_\_\_ *I will represent my petition before the Plan Commission and the City Council of the City of Joliet.*

\_\_\_\_\_ *I hereby authorize the person named below to act as my agent in representing this application before the Plan Commission and the City Council of the City of Joliet.*

Note: The agent is the official contact person for this project and the single point of contact. All correspondence and communication will be conducted with the agent. If no agent is listed, the owner will be considered the agent.

(Please Print)

\_\_\_\_\_  
Agent's Name Company Name *(If Applicable)*

\_\_\_\_\_  
Agent's Mailing Address City/State/Zip

(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Agent's Phone Area Code Mobile Area code Fax

Email address: \_\_\_\_\_

If an agent is representing the owner of the property, please complete the following information:

I hereby authorize the person named above to act as my agent in processing this application before the City Council of the City of Joliet:

Owner's Signature (s):  
\_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

**IV. REGISTERED VOTERS RESIDING ON TERRITORY TO BE ANNEXED:**

\_\_\_\_\_  
NAME ADDRESS (\_\_\_\_\_) \_\_\_\_\_  
Area Code Phone

\_\_\_\_\_  
NAME ADDRESS (\_\_\_\_\_) \_\_\_\_\_  
Area Code Phone

\_\_\_\_\_  
NAME ADDRESS (\_\_\_\_\_) \_\_\_\_\_  
Area Code Phone

**v. Property information:**

**PROPERTY ADDRESS:**

\_\_\_\_\_  
PROPERTY ADDRESS                      CITY                      STATE                      TOWNSHIP                      ZIP CODE

PROPERTY IDENTIFICATION NUMBER (P.I.N. or tax number(s)): \_\_\_\_\_

**LEGAL DESCRIPTION OF PROPERTY (OR ATTACH COPY OF "PLAT OF SURVEY"):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LOT SIZE:      WIDTH \_\_\_\_\_ DEPTH \_\_\_\_\_ AREA \_\_\_\_\_

PRESENT LAND USE: \_\_\_\_\_

EXISTING ZONING: \_\_\_\_\_

PROPOSED LAND USE AND/OR PURPOSE OF ANNEXATION: \_\_\_\_\_

ZONING CLASSIFICATION REQUESTED: \_\_\_\_\_

**USES OF SURROUNDING PROPERTIES:**

NORTH \_\_\_\_\_ EAST \_\_\_\_\_

SOUTH \_\_\_\_\_ WEST \_\_\_\_\_

**IMPORTANT**

You must attach a list of all land owners located within 300-feet of the property to be annexed. You must also appear before the Plan Commission and the City Council to present your annexation request. A lawyer may appear on your behalf.

The undersigned understands that they are not entitled to any City of Joliet funding for public improvements by virtue of this annexation.

I hereby depose and say that all of the above statements are true and correct to the best of my information and behalf.

\_\_\_\_\_  
PETITIONER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PETITIONER

\_\_\_\_\_  
DATE

Subscribed and Sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**