



Annexation Application

Department of Planning & Community Development
 101 Old Main Street, Bradenton, FL 34205
 Ph: (941) 932-9400 Fax: (941) 932-9534
www.cityofbradenton.com

CONTACT INFORMATION REQUIRED

Name of Property Owner: _____

Owner Address: _____ Telephone: _____

Name of Agent: _____

Agent Address: _____ Telephone: _____

Owner/Agent Email: _____

PROPERTY INFORMATION REQUIRED

Property Address: _____

Parcel ID: _____ Acreage: _____

Existing Use of Property: _____

Existing Zoning: _____ Existing Future Land Use: _____
*Existing Zoning and Future Land Use information may be obtained from Manatee County Government at (941) 748-4501

Proposed Use of Property: _____

Proposed Zoning: _____ Proposed Future Land Use: _____
*click to view city [Zoning map](#) *click to view city [FLU map](#)

IS THIS A REQUEST FOR CONTRACTION OR DE-ANNEXATION? Yes No

MATERIALS FOR REVIEW REQUIRED

Before submitting an application to the City of Bradenton, please check with the Planning & Community Development Department to verify all essential information for review is present. Incomplete applications will delay the review process.

- ▶ Annexation Application
- ▶ Application Fee: Property up to 10 Acres - \$2,120. Property 10 Acres or more - \$3,120
- ▶ Notarized Agent Authorization Form, if applicable
- ▶ Letter of Request
- ▶ Legal Description
- ▶ Property Survey (signed & sealed within the last three years)
- ▶ Aerial Photo of Property
- ▶ One (1) electronic copy in pdf format of Application and all required support materials
- ▶ Additional information may be required for review, as needed

SIGNATURE REQUIRED

The owner of this property and/or the undersigned agree to conform to all applicable laws of the City of Bradenton and to all applicable Federal, State, and County laws.

 Signature of Owner/Applicant Date

CITY STAFF ONLY REQUIRED

Application Fees: Fee Required: \$2,120 (10 acres or less) \$3,120 (10 acre or more)	Application Sufficiency: Sufficient: <input type="checkbox"/> Incomplete: <input type="checkbox"/> _____
FEE COLLECTED: \$ _____	_____
RECEIPT #: _____	APPLICATION #: _____

DRC: _____ JPC REVIEW: _____ 1ST CC READ: _____ 2ND CC READ: _____

REVIEW DATES - TO BE COMPLETED BY CITY STAFF



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PLANNING & ZONING AGENT AUTHORIZATION FORM

Property Address: _____

I, _____, the registered property owner(s) of the above noted property, do hereby authorize

to act on my behalf and take all actions necessary for the processing, issuance and acceptance of this permit or certification and any and all standards and conditions applicable.

STATE OF FLORIDA, MANATEE COUNTY

The Foregoing instrument was acknowledged before me this ____ day of _____,

produced _____ respectively, as

as identification and who did (did not) take an oath:

_____, Notary Public

Print Name

State of Florida

My Commission Expires: _____