

PETITION SIGNERS

NOTE: This petition may be signed by qualified persons even though they may not know their property description or voter precinct number.

*PO = Property Owner RV = Registered Voter OV = Owner and Registered Voter

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

SIGNATURE	PRINTED NAME	I AM A:*			DATE
		PO	RV	OV	
PROPERTY ADDRESS	PROPERTY DESCRIPTION				VOTER PRECINCT #
	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

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	TOWNSHIP	RANGE	¼ SEC.	LOT #(S)	

EXPEDITED ANNEXATION CODE EXCERPTS

MILWAUKIE MUNICIPAL CODE SECTIONS

19.1104.1 Expedited Process

- A. A petition for any type of minor boundary change may be processed through an expedited process as provided by Metro Code Chapter 3.09.
- 5. Approval criteria for annexations are found in subsection 19.1102.3.

19.1102.3 Annexation Approval Criteria. The city council shall approve or deny an annexation proposal based on findings and conclusions addressing the following criteria.

- A. The subject site must be located within the city urban growth boundary;
- B. The subject site must be contiguous to the existing city limits;
- C. The requirements of the Oregon Revised Statutes for initiation of the annexation process must be met;
- D. The proposal must be consistent with Milwaukie comprehensive plan policies;
- E. The proposal must comply with the criteria of Metro Code Sections 3.09.050(d) and, if applicable, (e).
- F. The proposal must comply with the criteria of Section 19.902 for Zoning Map Amendments and Comprehensive Plan Map Amendments, if applicable.

METRO CODE SECTIONS

3.09.050 Hearing & Decision Requirements for Decisions Other Than Expedited Decisions.

- (d) To approve a boundary change, the reviewing entity shall apply the criteria and consider the factors set forth in subsections (d) and (e) of Section 3.09.045.

MILWAUKIE COMPREHENSIVE PLAN

Section 12: Urban Growth Management Goals and Policies

Overarching Section Goal: Coordinate future urban growth, development, and provision of City services in an equitable, cost-effective, and sustainable manner in cooperation with regional partners.

Goal 12.4: Annexation

Annex lands within the Milwaukie Planning Area.

Applicant Response

The proposal meets all the applicable requirements listed above.

X _____
(Signature)

**CERTIFICATION OF PROPERTY OWNERSHIP OF
100% OF LAND AREA**

I hereby certify that the attached petition contains the names of the owners¹ (as shown on the last available complete assessment roll) of 100% of the land area of the territory proposed for annexation as described in the attached petition.

Name _____

Title _____

Department _____

County of _____

Date _____

¹ Owner means the legal owner of record or, where there is a recorded land contract which is in force, the purchaser thereunder. If a parcel of land has multiple owners, each consenting owner shall be counted as a percentage of their ownership interest in the land. That same percentage shall be applied to the parcel's land mass and assessed value for purposes of the consent petition. If a corporation owns land in territory proposed to be annexed, the corporation shall be considered the individual owner of that land.

CERTIFICATION OF LEGAL DESCRIPTION AND MAP

I hereby certify that the description of the territory included within the attached petition (located on Assessor's Map _____) has been checked by me. It is a true and exact description of the territory under consideration and corresponds to the attached map indicating the territory under consideration.

Name _____

Title _____

Department _____

County of _____

Date _____

CERTIFICATION OF REGISTERED VOTERS

I hereby certify that the attached petition contains the names of at least 50% of the electors registered in the territory proposed for annexation as described in the attached petition.

Name _____

Title _____

Department _____

County of _____

Date _____

NOTICE LIST

(This form is NOT the petition)

LIST THE NAMES AND ADDRESSES OF ALL PROPERTY OWNERS AND REGISTERED VOTERS IN THE TERRITORY PROPOSED FOR ANNEXATION.

Name of Owner/Voter	Mailing Street Address	Property Address
	Mailing City/State/Zip	Property Description (township, range, ¼ section, and tax lot)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Name of Owner/Voter	Mailing Street Address	Property Address
	Mailing City/State/Zip	Property Description <small>(township, range, ¼ section, and tax lot)</small>
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		

**MILWAUKIE PLANNING DEPARTMENT**

6101 SE Johnson Creek Blvd
Milwaukie, OR 97206
503.786.7600
planning@milwaukieoregon.gov

Confidential Census Form

Date:	Street Address:	
Housing Type: (Use one form per housing unit)	<input type="checkbox"/> Single-Family Structure <input type="checkbox"/> Multi-Family Structure <input type="checkbox"/> Mobile Home <input type="checkbox"/> Group Housing <input type="checkbox"/> Other Housing	Occupancy: <input type="checkbox"/> Owner-Occupied <input type="checkbox"/> Renter-Occupied <input type="checkbox"/> Seasonal <input type="checkbox"/> Vacant
Number of Residents:		

If you indicated Group Housing or Other Housing above, please complete the appropriate table below.

Group Housing
Facility Type: <input type="checkbox"/> Adult Correctional Facility <input type="checkbox"/> Juvenile Facility e.g., group home, correctional or non-correctional <input type="checkbox"/> College/University Student Housing Includes off-campus housing owned by a college/university <input type="checkbox"/> Military Quarters <input type="checkbox"/> Other Institutional Facility e.g., psychiatric hospitals, inpatient hospice facilities <input type="checkbox"/> Nursing/Skilled-Nursing Facility e.g., assisted living and memory care <input type="checkbox"/> Non-Institutional Facility e.g., emergency and transitional shelters, residential treatment centers for adults, religious group quarters
Facility Name:

Other Housing
Housing Unit Type: <input type="checkbox"/> Camper/RV <input type="checkbox"/> Car/Van <input type="checkbox"/> Tent <input type="checkbox"/> Motels/Hotels <input type="checkbox"/> Houseboat <input type="checkbox"/> Other Boat <input type="checkbox"/> Other, please specify: _____

The information you share on this form is being collected for use by the Portland State University Population Research Center. For questions about the way these census data are used, please contact the Population Research Center at 503-725-3922.