**Mendocino LAFCo**

*LAFCo Office Use Only*

*Date Filed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Received By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_*

200 South School Street

Ukiah, CA 95482

(707) 463-4470

Website: [www.mendolafco.org](http://www.mendolafco.org)

Email: eo@mendolafco.org

**LANDOWNER CONSENT FORM**

The undersigned landowner hereby consents to inclusion of their property within the proposed change of organization or reorganization (local agency boundary change) described below.

**Please write/print legibly**

|  |  |
| --- | --- |
| *Name of Proposal*  |  |

|  |  |
| --- | --- |
| *Annex (add) to*  |  |
| *Detach (remove) from*  |  |

*(city or district name)*

The undersigned owns the property below within the proposed annexation/detachment area.

|  |  |
| --- | --- |
| *Property Address* |  |
| *Assessor’s Parcel No.* |  |

*\*For landowners with multiple parcels, attach a list of additional property addresses & APNs.*

**Please check the applicable box before signing below:** [ ]  Landowner(s) [ ]  Authorized Agent

|  |  |  |
| --- | --- | --- |
|  | **Signer 1** | **Signer 2** |
| *Print Name* |  |  |
| *Signature* |  |  |
| *Date* |  |  |
| *Contact Info.* |  |  |

*\*All individuals listed on the property title or recorded deed must sign for valid consent. If there are more than two owners of record, complete and attach the second page of this form.*

*\*\*Agents signing on behalf of a landowner (corporation/company) must attach proper authorization.*

**LANDOWNER CONSENT FORM**

Additional Signatures Page

|  |  |  |
| --- | --- | --- |
|  | **Signer 3** | **Signer 4** |
| *Print Name* |  |  |
| *Signature* |  |  |
| *Date* |  |  |
| *Contact Info.* |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Signer 5** | **Signer 6** |
| *Print Name* |  |  |
| *Signature* |  |  |
| *Date* |  |  |
| *Contact Info.* |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Signer 7** | **Signer 8** |
| *Print Name* |  |  |
| *Signature* |  |  |
| *Date* |  |  |
| *Contact Info.* |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Signer 9** | **Signer 10** |
| *Print Name* |  |  |
| *Signature* |  |  |
| *Date* |  |  |
| *Contact Info.* |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Signer 11** | **Signer 12** |
| *Print Name* |  |  |
| *Signature* |  |  |
| *Date* |  |  |
| *Contact Info.* |  |  |