



**City of Tenino**  
**PO Box 4019**  
**149 Hodgden Street South**  
**Tenino, WA 98589**  
**Telephone (360) 264-2368 Fax (360) 264-5772**



## NOTICE OF INTENT TO COMMENCE ANNEXATION PROCEEDING

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We, the undersigned, who are owners of more than ten percent in value, according to the assessed valuation for general taxation of the property described below, wish to inform the Tenino City Council that we intend to circulate a petition annexing this area to the City of Tenino. We request a public meeting with the City Council to determine whether the City is interested in annexing our property and, if so, under what conditions. A map of the proposed annexation area is attached to this notice.

**Annexation Proposal Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Legal Description of Proposed Annexation Area (attached):** \_\_\_\_\_

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

**Signatures:**

**Tax Parcel Number(s) of Ownership:**

1. \_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Print Name  
 \_\_\_\_\_  
 Mailing Address  
 \_\_\_\_\_  
 City, State, Zip

1. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. \_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Print Name  
 \_\_\_\_\_  
 Mailing Address  
 \_\_\_\_\_  
 City, State, Zip

2. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please attach signatures, addresses and tax parcel numbers of any other annexation initiators.

Received by the Community Development Department on _____. FILE # _____. Public Meeting Date: _____
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