APPLICATION:
JOIN CITY OF CHARLESTON

For more information, visit http://www.charleston-sc.gov/JOIN
Or contact Christopher Morgan, at 843.724.3774 | annex@charleston-sc.gov

1. OWNER INFORMATION: Please complete the following application to request
   that your property be incorporated into the municipal limits of the City of
   Charleston. Phone numbers will not be published. All owners of the property sign
   page two and submit it to the Annexation Coordinator. *Required

*Property Owner(s):___________________________________________________________

*Mailing Address:____________________________ *Telephone:____________________

*City:_______________ *State:______ *Zip:_______        Email:______________________

2. PROPERTY INFORMATION: Cities must provide the Justice Department with the
   population demographics and the land use of each property added to the city.
   Write “None” if the property is vacant. Population data is used to create voting
   districts and does not impact the decision to approve your annexation.

*Property Address: _________________________    Tax Map Number: ______________

*Number of Current Residents: _____    *Race of Current Residents: ____________

Current Land use: ________________    Future Land use: ________________
   (i.e. home, bank, carwash, etc)    (i.e. home, bank, carwash, etc)

3. SUBMIT APPLICATION: Please submit signed application to Christopher Morgan at:

   MAIL: City of Charleston, 2 George St, Suite 3100, Charleston, SC 29401

   PICKUP: Call Christopher Morgan at (843) 724-3774 for pick-up

   EMAIL: annex@charleston-sc.gov

   FAX: (843)724-3772
STATE OF SOUTH CAROLINA  )  PETITION FOR ANNEXATION
COUNTY OF CHARLESTON     )

TO THE HONORABLE MAYOR AND CITY COUNCIL OF CHARLESTON

    WHEREAS, SECTION 5-3-150 (3) Code of laws of South Carolina provides for the
annexation of an area or property which is contiguous to a City by filing with the municipal
governing body a petition signed by all persons owning real estate in the area requesting
annexation, and

    WHEREAS, the undersigned are all persons owning real estate in the area requesting
annexation, and

    WHEREAS, the area requesting annexation is described as follows, to wit:

SAID PROPERTY, located on James Island (approximately______acres) to be annexed is
identified by the Charleston County Assessors Office as Property Identification Number: TMS#
(Address:_________________________________________________________).

    NOW, THEREFORE, the undersigned petition the City Council of Charleston to annex the
above described area into the municipal limits of the City of Charleston.

FREEHOLDERS (OWNERS) SIGNED     DATE OF SIGNATURE

____________________________________ ______________________________
(Signature)      (Date)

____________________________________ ______________________________
(Print Name)      (Print Name)

____________________________________ ______________________________
(Signature)      (Date)

____________________________________ ______________________________
(Print Name)      (Print Name)