

*City web page

<https://www.fresno.gov/publicworks/land-development/#tab-6>

**ANNEXATION REQUEST FORM
FOR COMMUNITY FACILITIES DISTRICT (CFD)
FOR SINGLE FAMILY RESIDENTIAL (SFR) SUBDIVISION MAINTENANCE**

**CITY OF FRESNO, DEPARTMENT OF PUBLIC WORKS
Traffic and Engineering Services Division**

Date: _____

As a representative of the owner of at least 10% of the land within the below referenced subdivision, I am hereby requesting annexation into a City of Fresno CFD for the purposes of maintenance and replacement as a condition of maintenance of features specified below.

***Package considered complete when all information has been filled in and the listed items below have been submitted.**

APPLICANT COMPANY NAME: _____

ADDRESS: _____ **CONTACT:** _____

CITY: _____ **ZIP:** _____ **FAX:** _____

PHONE: _____ **EMAIL:** _____

LAND OWNER COMPANY NAME: _____

AUTHORIZED SIGNATORY: _____ **TITLE:** _____

ADDRESS: _____

CITY: _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

EMAIL: _____

FINAL MAP NUMBER: _____ **TENTATIVE MAP NUMBER:** _____

C.U.P. NUMBER: _____ **OTHER:** _____

Is this Final Map part of a phased development? _____

ALL ITEMS LISTED BELOW MUST BE SUBMITTED WITH THE REQUEST PACKAGE

___ Engineers quantified estimate of requested items to be included for maintenance
Additional refined information may be required

___ Total Area of Taxable Lots (Square feet)

___ A copy of the approved Conditions of Approval w/all attachments

___ One copy of the approved Tentative Map

___ Send electronic CAD drawing of Final Map (to include all maintained areas and additional features) to Luis.Gonzalez@fresno.gov

___ One copy of the ***Technically Correct Final Map. Must have all required landscape areas and all additional features identified and located.**

___ One set of ***Technically Correct Landscape Plans**

___ One set of ***Technically Correct Street Construction Plans**

___ One set of ***Technically Correct Street Light Plans**

___ Detailed plans for all other features to be included for maintenance (ie. Stamped concrete, sound walls, etc.) Include specifications and cost estimates for nonstandard items to be reviewed and approved

***All Parks require City Engineer approval.**

***Technically Correct shall mean that CFD maintained quantities are not subject to change**

For questions regarding submittal requirements please contact Adrian Gonzalez at (559) 621-8693 or Luis.Gonzalez@fresno.gov

I am requesting the following items to be maintained by the CFD:

STANDARD MAINTAINED LANDSCAPING AND FEATURES WITHIN SUBDIVISION:

___ **Landscaping** within public easements (median islands, parkways, buffers, trails)

___ Shrubs, Trees & groundcover

___ Turf, Shrubs, Trees & groundcover

___ **All Trees:** All trees per approved Plans within public easements

___ **Sidewalks** on **local and major** streets within public easements

___ **Curb Ramps** on **local and major** streets within public easements

___ **Curbs and Gutters** on **local and major** streets within public easements

___ **Valley Gutters** on **local and major** streets within public easements

___ **Street Lights** on **local and major** streets within public easements

___ **Street Paving** on **local** street within public easements

___ **Street Name Signage** on **local** street within public easements

___ **Sound Walls:** City required on **major** streets

___ **Trail Hardscape and Amenities:** City required trail(s)

NONSTANDARD ITEMS:

***All nonstandard items subject to approval by the Public Works Department.**

Submit a complete CFD request package to Traffic and Engineering Services Division for review. **Seven (7)** working days are allowed for reviewing the submittal package for completeness at which time determination will be made for acceptance of the request for processing. **All Construction Plans and Final Map shall be *Technically Correct prior to acceptance for processing.** The applicant will be contacted if any additional information is needed for acceptance.

FOLLOWING ACCEPTANCE FOR PROCESSING, ANY CHANGES TO THE AMOUNTS OR TYPES OF FEATURES WILL CAUSE DELAYS AND WILL REQUIRE ADDITIONAL PROCESSING CHARGES.

Applicant Signature _____ Date _____

Print Name _____

ACCEPTED FOR REVIEW

Signature _____ Date _____

___ **\$5,400.00** Processing Charge CM/ARN: _____

ACCEPTED FOR PROCESSING

Signature _____ Date _____