

# Petition for Annexation to CCCSD

Central Contra Costa Sanitary District  
5019 Imhoff Place  
Martinez, CA 94553  
Attn: Permit Section

For District Use Only	
Atlas: _____	LCID: _____
DA# _____	Job# _____
App# _____	LX Note <input type="checkbox"/>

I, the owner of the real property described below, hereby petition and assent that said property to be provided wastewater utility service through annexation to Central Contra Costa Sanitary District (CCCSD). Said real property is not within the boundaries of any other wastewater utility service agency. It is understood that any annexation is subject to the approval of the CCCSD Board of Directors and the Contra Costa Local Agency Formation Commission (LAFCO).

### OWNER OF REAL PROPERTY AND MAILING ADDRESS:

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

### PROPERTY TO BE SERVED:

Street Address: \_\_\_\_\_ City: \_\_\_\_\_  
Acreage: \_\_\_\_\_ Assessor's Parcel Number (APN): \_\_\_\_\_

### REASON FOR SERVICE REQUEST:

- Existing Building / Septic Tank Conversion       New Construction  
 New Subdivision (\_\_\_\_ lots)       CCCSD Request / Orphaned Property  
 Other (describe): \_\_\_\_\_

### PRIOR CEQA ENVIRONMENTAL DOCUMENT ADDRESSING SERVICE:

- Environmental Impact Report (EIR)       Negative Declaration  
 Exemption (service to single properties typically are exempt)

Preparing Agency: \_\_\_\_\_ Document Date: \_\_\_\_\_

I, the undersigned owner of the real property described above, hereby declare under penalty of perjury that I have read the foregoing Petition and the attached Financial Disclosure Statement, know the contents thereof, and that all of the facts stated and set forth therein are true to the best of my knowledge.

Dated: \_\_\_\_\_ at \_\_\_\_\_, California

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

### ATTACHED: CONTRA COSTA LAFCO FINANCIAL DISCLOSURE STATEMENT

Contra Costa Local Agency Formation Commission  
**FINANCIAL DISCLOSURE STATEMENT**

Consistent with the requirements of the State of California Fair Political Practices Commission, each applicant or their agent must complete and submit this Statement of Disclosure form with any application that requires discretionary action by Contra Costa LAFCO (Government Code §84308 of the Political Reform Act).

Person is defined as: "Any individual, firm, co-partnership, joint venture, association, social club, fraternal organization, corporation, estate, trust, receiver, syndicate, this and any other county, city and county, city, municipality, district or other political subdivision, or any other group or combination acting as a unit."

1. **List the names of all persons having any ownership interest in the property involved or any financial interest in the application.**

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2. **If any person identified pursuant to #1 is a corporation or partnership, list the names of all individuals owning more than 10% of the shares in the corporation or owning any partnership interest in the partnership.**

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3. **If any person identified pursuant to #1 is a non-profit organization or a trust, list the names of any person serving as director of the non-profit organization or as trustee or beneficiary or trustor of the trust.**

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4. **Has any person identified pursuant to #1 had \$250 or more worth of business transacted with any Commissioner or Alternate or Commission staff person within the past 12 months? Yes / No \_\_\_\_\_**

If "Yes", please indicate person's name/s: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Has any person identified pursuant to #1, or his or her agent, contributed \$250 or more to any Commissioner or Alternate within the past 12 months?

Yes \_\_\_\_ No \_\_\_\_

If "Yes", please indicate person(s) or agent(s) making contribution:

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

and name/s of Commissioner(s) / Alternate(s) receiving contribution:

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

**I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.**

\_\_\_\_\_  
Name/Title and Number of Application (please print or type)

\_\_\_\_\_  
Name of Applicant (please print or type)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

# Contra Costa LAFCO Commissioners

(as of 7/28/16)

## **CITY MEMBERS**

Don Tatzin - Term expires 5/4/20  
Rob Schroder, Vice Chair - Term expires 5/6/19  
Tom Butt - Alternate, Term expires 5/6/19

## **COUNTY MEMBERS**

Federal Glover, Chair - Term expires 5/7/18  
Mary N. Piepho - Term expires 5/7/18  
Candace Andersen - Alternate, Term expires 5/4/20

## **PUBLIC MEMBERS**

Donald A. Blubaugh - Term expires 5/4/20  
Sharon Burke - Alternate, Term expires 5/4/20

## **SPECIAL DISTRICT MEMBERS**

Michael R. McGill – Term expires 5/4/20  
Igor Skaredoff – Term expires 5/7/18  
Stanley Caldwell – Alternate, Term expires 5/7/18