

APPLICATION FOR THE ANNEXATION TO THE WEST BAY SANITARY DISTRICT ON-SITE WASTEWATER DISPOSAL ZONE

Bı	riefly describe the nature of the proposed change of organization or reorganization.
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W	/hat are the reasons for the proposal?
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Do	pes this application have 100% consent of landowners in the affected area?
	Yes No
Es	stimated acreage: Assessor's Parcel Number:
<u>SE</u>	ERVICES
	st the name or names of all existing cities and special districts whose service area or service sponsibility would be altered by the proposed change of organization or reorganization.

2. List all changes to the pattern of delivery of local services to the affected area. For each service affected by the proposed change(s) of organization, list the present source of service (state "none" if service is not now provided), the proposed source of service and the source of funding for construction of necessary facilities (if any) and operation. Examples are given on the first two lines of the space provided for your response.

	<u>SERVICE</u>	PRESENT SOURCE	PROPOSED SOURCE	FUNDING CONSTRUCTION		
	Sewer	**************************************		Proponent		
C.	PROJECT PRO	POSAL INFORMATION				
1.	Please describe the general location of the territory that is the subject of this proposal. Refer to major highways, roads and topographical features.					
2.	Describe the pro	esent land use(s) in the su	ubject territory.			
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3.	How are adjace	nt lands used?				
4.		ed change of organization to be developed?	result in additiona	l development? If s	o, how is the	
5.	What is the gen	eral plan designation of th	e subject territory?	>		
6.	What is the exis	ting zoning designation of	the subject territo	ry?		

7.	What pre-zoning, environmental review or development approvals have already been obtained for development in the subject territory?			
8.	What additional approvals will be required to proceed?			
9.	Does any portion of the subject territory contain any of the followingagricultural preserves, sewer or other service moratorium or wetlands subject to the State Lands Commission jurisdiction?			
10.	If no specific development projects are associated with this proposal, will the proposal increase the potential for development of the property? If so, how?			

propos	Bay Sanitary District will consider the person signing this application as the proponent of the sed action(s). Notice and other communications regarding this application (including fee payment) directed to the proponent at:			
NAME	·			
ADDR	ESS: PHONE:			
	Signature of Proponent			

N:/Admin/Annexation/OWDZ-Zone/OWDZapplform (6/24/09)





CONSENT TO INCLUSION OF PROPERTY

The undersigned owner(s) of property hereby consent(s) to inclusion of that property within a proposed annexation to the West Bay Sanitary District.

If signatures are affixed representing 100% of the affected property the Local Agency Formation Commission may consider the proposal without a noticed public hearing.

DATE	NAME	ASSESSOR'S PARCEL NO.(s)
		
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REQUEST TO WAIVE CONDUCTING HEARING AUTHORITY

The undersigned owner(s) of property hereby request that the West Bay Sanitary District and the San Mateo Local Agency Formation Commission "Waive Conducting Hearing Authority", pursuant to Government Code Section 56837.

DATE	NAME	ASSESSOR'S PARCEL NO.(s)
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Supplemental Information on Completing the Application for Annexation into On-Site Wastewater Disposal Zone

A. General Information

- 1. To annex property into the West Bay Sanitary District's **On-Site Wastewater Disposal Zone**
- 2. To obtain sewer service to replace existing septic system and reason why: for example, failing septic; plans to remodel, or construct additions; etc.
- 3. This applies only to the property owners of the parcel to be annexed.
- 4. self-explanatory

B. Services

- 1. West Bay Sanitary District
- Sewer None WBSD Proponent Fees

C. Project Proposal Information

- Call Leslie Lambert of Town of Portola Valley at (650) 851-1700 with questions on zoning and their General Plan.
- Talk with Town about their permit requirements for sewer installation.

CONSENT TO INCLUSION OF PROPERTY Form

- The property owners of the parcel need to print names, sign names, date, and indicate the assessor's parcel number.
- Return to WBSD with application.
- All owners on title must have names and signatures on form

CONSENT TO WAIVE CONDUCTING HEARING AUTHORITY Form

- If property owners wish to simplify the approval process, they need to complete this form exactly like previous form.
- All owners on title must have names and signatures on form

PLAT AND LEGAL DESCRIPTION OF PARCEL TO ACCOMPANY APPLICATION

SIGNED AND NOTARIZED AGREEMENT CREATING COVENANTS RUNNING WITH THE LAND TO ACCOMPANY ON-SITE WASTEWATER DISPOSAL ZONE ANNEXATION APPLICATIONS

N:/Admin/Annexation/OWDZ-Zone/guidanceOWDZ 09/2002

WEST BAY SANITARY DISTRICT Annexation into District and On-Site Wastewater Disposal Zone

SCHEDULE OF STANDARD FEES* AND DEPOSITS

FEES COLLECTED BY AND PAYABLE TO WEST BAY SANITARY DISTRICT:

Annexation to the West Bay Sanitary District only:

Per Parcel \$ 500: Processing Fee

(Applicant to be notified by West Bay when fee due)

Annexation into West Bay Sanitary District and On-Site Wastewater Disposal Zone:

Per Parcel \$1,400: Publication Deposit

(Payable at time OWDZ application submitted) \$1,000: Processing Fees (=\$500 District

Annex & \$500 OWDZ Annex)

Class 3 Sewer Permit (If required) \$ 200: Permit Fee

\$2,000: Admin Deposit (Standard)

Higher deposit amount could be required if WBSD staff time & costs estimated higher for

applicant's project

Class 1 Sewer Permit \$ 100: Permit/Inspection Fee

Connection Fee – Single-family residence \$4,289.20: (Per District Regulations as of 3/16/09)

Reimbursement Fees: Applicable only if applicant's connection is to portion of main line sewer that is served by signed Reimbursement Agreement that the developer has established with the District to spread the construction costs equitably between all connectors. Reimbursement fees will vary with each agreement and also by the numerical order the connection is within the agreement. Reimbursement Agreements may have an interest factor or ENR construction factor in the fee calculation. A new connector may have to pay into and be part of more than one Reimbursement Agreement.

FEES COLLECTED BY SMCO LAFCo

Contact Martha Poyatos at San Mateo County LAFCo, 650-363-4224 for their fee schedule.

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