

# **BUTTE LOCAL AGENCY FORMATION COMMISSION**

## **Application for Dissolution**

July 2005

**Butte Local Agency Formation Commission**

1453 Downer Street, Suite C

Oroville, CA 95965-4950

Phone: 530-538-7784

Fax: 530-538-2847

<http://www.buttelafco.org>

# BUTTE LOCAL AGENCY FORMATION COMMISSION

1453 Downer Street, Suite C  
Oroville, CA 95965-4950  
(530) 538-7784 (phone) 530-538-2847 (fax)  
<http://www.buttelafo.org>

## Application for Dissolution

Pursuant to LAFCO Policy 6.3, an application to LAFCO requires the submittal of the attached application form, supporting documentation as required in the application and all requisite fees established at the time of application. This application is available in electronic format on the LAFCO website or by e-mail. Please contact the LAFCO office for assistance.

---

### **Application Packet Checklist**

*(Provided for the use of applicants)*

- 1. Two (2) completed copies of the Butte Local Agency Formation Commission Application.
  - 2. (a) A certified resolution of application from the affected agency; or  
(b) A landowner or registered voter petition making application to LAFCO.
  - 3. A certified resolution of consent from applicable city if project is an annexation of incorporated parcels to a County Service Area.
  - 4. Five (5) extra copies of legal description of the subject area complying with State Board of Equalization standards.
  - 5. Ten (10) extra copies of the map depicting the subject area with vicinity map complying with State Board of Equalization standards.
  - 6. Two (2) copies of environmental documentation complying with the California Environmental Quality Act (CEQA) including documentation (Notice of Intent/Notice of Preparation) that the documents were circulated to LAFCO for review and comment.
    - Categorical Exemption including Notice of Exemption
    - Negative Declaration including Initial Study and Notice of Determination
    - Environmental Impact Report (EIR) including Draft and Final EIR
  - 7. Appropriate fees obtained from LAFCO Fee Schedule attached:

Deposit ( <i>payable to Butte LAFCO</i> )	\$ _____
Sphere of Influence ( <i>payable to Butte LAFCO</i> )	\$ _____
State Board of Equalization ( <i>payable to SBE</i> )	\$ _____
  - 8. All necessary signatures:
    - Agent Authorization (*if applicable*)
    - Agreement to Pay
    - Disclosure requirements
    - Certification of application
    - Indemnification
- (NOTE: If application is initiated by resolution of the affected agency, all signatures need to be of the initiating agency representative.)*
- 9. All required "LAFCO Exhibits 1-7."

---

**SIGNATURE PAGE**

---

**Agent Authorization**

**(not applicable if annexation does not have 100% landowner support)**

Authorized Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

is hereby authorized to process this application on my property identified as Butte County Assessor's Parcel Number(s) \_\_\_\_\_

This authorization allows representation for all applications, hearings, appeals, etc. and to sign all documents necessary for said processing, but not including document(s) relating to record title interest. Owner(s) of Record:

_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>

---

**Disclosure Requirements**

Pursuant to Government Code Sections 56700.1 and 81000 et seq., and Butte Local Agency Formation Commission policies, any person or combination of persons who directly or indirectly contribute \$1000 or more or expend \$1000 or more in support of or in opposition to a change of organization or reorganization that has been submitted to the commission and will require an election must comply with the reporting and disclosure requirements of the Political Reform Act of 1974 and the Butte Local Agency Formation Commission. These disclosure requirements mandate disclosures be made at specified intervals. Additional information may be obtained by contacting the LAFCo office at (530) 538-7784. Disclosure requirements have been read and acknowledged.

_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>

---

**Certification**

Applicants request that proceedings as described in this application be taken in accordance with the provisions of Government Code Section 56000 et seq. and herewith affix their signatures. **Note:** Applications will not be accepted without the signature of one or more of the following: 1) the legal owner(s) or official agents with Power of Attorney or written authorization to sign, 2) Chief Petitioners, and/or 3) Chair of the Legislative Body submitting a Resolution of Application.

_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>

---

---

## **Agreement to Pay for Time and Materials**

### **Charges and Deposits**

LAFCo charges are based upon actual staff time and other expenses attributable to processing applications, reviewing project proposals and researching matters as requested. Such charges may be incurred prior to or without the filing of an application with LAFCo. Individuals and agencies who request services, research, or review must provide a deposit toward project expenses, as listed on the attached current fee schedule, along with a signed copy of this agreement. All deposits are subject to increase, should the Executive Officer determine that the magnitude of the project justifies the increase.

The amount of staff time necessary to process any individual application cannot be easily predicted in advance. Therefore, applicants should be aware that LAFCo charges may exceed the applicable deposit. (unexpended deposits will be refunded.)

**PLEASE UNDERSTAND THAT THE CHARGES MUST BE PAID WHETHER OR NOT THE PROPOSAL IS APPROVED.**

### **Staff Assignments**

The Executive Officer shall assign LAFCo staff members to projects as appropriate. Should the scope of a project require that outside consulting or other needed services be obtained, applicants will be responsible for the entire cost of recruitment, source selection, and payment for such outside services. Applicants are responsible for paying actual costs for any services obtained through contract, even if such costs exceed the charge-out rate of a regular staff member providing similar services.

### **Billing Procedure**

LAFCo invoices will detail tasks, hours, staff charge-out rates, staff members responsible for work, and/or costs of contracted services. Invoices will also reflect the remaining balance of the initial deposit. Should the deposit be depleted, all staff work will cease until the deposit on file has been replenished. Projects with delinquent balances will not be scheduled for hearing, and the Commission will consider applicants to have waived any and all statutory deadlines.

This form must be signed by the person responsible for payment or the employee or officer duly authorized to bind the applicant and must be filed with LAFCo along with the applicable deposit when an application is filed or a request for staff services is submitted.

**Questions regarding specific billing procedures should be directed to the LAFCo Executive Officer at (530) 538-7784.**

### **Agreement**

*On behalf of Applicant, I certify and agree to the following: Applicant has reviewed the above information, the attached LAFCo fee schedule, and the attached State Board of Equalization fee schedule all of which are part of this agreement. Applicant agrees to pay Butte LAFCo for all staff services, materials, and other charges attributable to its application or request for services. Applicant understands that services may be required before LAFCo receives a formal application, and agrees to pay for such services whenever incurred and regardless of whether a formal application is submitted to LAFCo. Applicant also understands and agrees that LAFCo's charges are payable regardless of whether the application is withdrawn, denied, or otherwise terminated prior to completion. Applicant understands that if the cost of services exceeds the deposit on file, staff work on the project will cease, and the project will not be scheduled for hearing until additional funds are provided. Applicant agrees to remit the applicable State Board of Equalization filing fee when required. Applicant agrees to pay all charges within 30 days of receipt of invoice or if no invoice has been sent, in any case prior to the filing of the Certificate of Completion for the project.*

*In the event of failure to pay charges when due, the unpaid balance will be subject to a monthly FINANCE CHARGE of 0.833% of the amount of the unpaid balance with a minimum charge of \$1.00. This is an ANNUAL PERCENTAGE RATE of 10%. Any payments made on the account will be credited first to any accrued interest. Should legal action be necessary to collect the charges due, the prevailing party shall be entitled to collect their attorney's fees, staff time and other expenses incurred in the action, in addition to any other relief.*

_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>

---

***Indemnity***

*Applicant agrees to indemnify, save harmless, and reimburse LAFCo for all reasonable expenses and attorney fees in connection with the defense of LAFCo and for any damages, penalties, fines or other costs imposed upon or incurred by LAFCo should LAFCo be named as a party in any litigation or administrative proceeding in connection with his/her/its application. Applicant agrees that LAFCo shall have the right to appoint its own counsel to defend it and conduct its own defense in the manner it deems in its best interest, and that LAFCo's taking such actions shall not limit Applicant's obligations to indemnify and reimburse defense costs or relieve Applicant of such obligations.*

*Applicant may request modification of the terms of this agreement in writing, with supporting reasons. Such modification can be approved only by the full Commission.*

_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>
_____	_____	_____	_____
<i>Date</i>	<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>

---

LAFCO Office Use Only

LAFCO File No: \_\_\_\_\_  
LAFCO Fees: \_\_\_\_\_  
SBE Fees: \_\_\_\_\_  
Sphere Fees: \_\_\_\_\_

Application Submitted: \_\_\_\_\_  
Application Incomplete: \_\_\_\_\_  
Application Complete: \_\_\_\_\_  
Certificate of Filing Issued: \_\_\_\_\_

---

**Butte Local Agency Formation Commission  
Standard Application Form**

**1. Applicant(s):** *(LAFCO will send copies of the staff report to a maximum of three applicants.)*

**Primary Contact of Initiating Agency**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_

**Proponents of Proposal**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_

**2. Change of Organization or other Action Requested** *(Please check all applicable actions related to proposal.)*

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Annexation to a city       | <input type="checkbox"/> Formation of a district            | <input type="checkbox"/> City Incorporation                    |
| <input type="checkbox"/> Annexation to a district   | <input type="checkbox"/> Formation of a County Service Area | <input type="checkbox"/> City Disincorporation                 |
| <input type="checkbox"/> Detachment from a city     | <input type="checkbox"/> Consolidation of cities            | <input type="checkbox"/> District Dissolution                  |
| <input type="checkbox"/> Detachment from a district | <input type="checkbox"/> Consolidation of districts         | <input type="checkbox"/> District Merger                       |
| <input type="checkbox"/> Service Agreement          | <input type="checkbox"/> Sphere of Influence Amendment      | <input type="checkbox"/> Establishment of Subsidiary Districts |

List the names of the existing or proposed affected agencies: \_\_\_\_\_

**3. Authority to File Application**

- Resolution of Application of Affected Agency. Certified copies of the Resolution of Application shall be included as **"LAFCO Exhibit 1"**; or
- Petition of landowners or registered voters shall be included as **"LAFCO Exhibit 1."** Complete the Petition for Change of Organization. *(Note: A petition is provided as LAFCO Form L-1.)*

**4. Proposal Boundaries**

- Provide a map of the subject territory meeting the specifications of the State Board of Equalization as listed in the Application Instructions. The boundary map shall be included as **"LAFCO Exhibit 2."**
- A legal description of the boundaries of the subject territory meeting the specifications of the State Board of Equalization. The legal description shall be included as **"LAFCO Exhibit 3."**
- Provide a Boundary Statement describing how the boundaries of this proposal were determined. *(Note: One of LAFCO's major responsibilities is to insure that public agencies have logical boundaries. If your proposal would create an "island," peninsula, or other illogical boundary, you may be requested to revise the boundaries.)*

## DISSOLUTION SUPPLEMENT

### A. Description / Justification

1. Is the district a registered voter district or a landowner voter district? Yes \_\_\_\_\_ No \_\_\_\_\_
2. When was the district(s) formed and under what principal act? \_\_\_\_\_  
\_\_\_\_\_
3. Explain why the dissolution is being proposed. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. What service(s) did the district(s) originally provide? \_\_\_\_\_  
\_\_\_\_\_
5. What service(s) is(are) being currently provided by the district(s)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Why or how will the dissolution provide greater efficiency in the delivery of governmental services? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Will the dissolution of the district enhance or reduce the services provided by the successor agency? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. What terms or conditions, if any, are proposed for this project? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### B. Land Use

1. How many total acres are within the district(s) to be dissolved? \_\_\_\_\_
2. What are the current General Plan \_\_\_\_\_ and zoning \_\_\_\_\_ designations overlaying the affected district(s)?
3. Describe the existing land use within the district boundaries. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. What is the estimated population number and density within the district(s)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Describe any significant land use issues that may result from the dissolution of the district. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Describe any concurrent land use applications to a local agency. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### C. Infrastructure and Public Services

1. Are there any infrastructure improvements (roads, water, sewer, drainage, irrigation, etc.) located within the district(s) proposed for dissolution that will not be maintained or will be abandoned? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Will the dissolution have any impact to public access in the affected territory? \_\_\_\_\_  
\_\_\_\_\_
3. How will the proposal impact regional circulation/transportation plans? \_\_\_\_\_  
\_\_\_\_\_
4. How will the dissolution improve or hinder organized community services? \_\_\_\_\_  
\_\_\_\_\_
5. Please complete the following table of service providers:

<i>Service</i>	<i>Presently Provided By</i>	<i>Proposed Provider</i>
<i>Fire Protection</i>		
<i>Police Protection</i>		
<i>Domestic Water Service</i>		
<i>Agricultural Water Service</i>		
<i>Sewer Service</i>		
<i>Solid Waste</i>		
<i>Road/Street Maintenance</i>		
<i>Power</i>		
<i>Street Lighting</i>		
<i>Planning &amp; Zoning</i>		
<i>Schools</i>		

**D. Significant Issues**

1. Describe any unique issues and/or pre-existing uses or conditions such as flooding, groundwater contamination, animal keeping, agricultural uses, ecological preserves, airport activity, traffic movement, pedestrian uses, etc., that may be affected by the dissolution. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Describe any unique or special communities of interest such as day care providers or neighborhood associations that exist within the district(s) proposed for dissolution. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**E. Intergovernmental Coordination**

1. Identify governmental agencies that overlay the district(s) to be dissolved, such as special districts, County supervisorial districts, county service areas, maintenance districts, others. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Has the proposal been circulated to all affected local agencies? Yes \_\_\_\_\_ No \_\_\_\_\_



3. Attach any responses/comments that have been received from the affected agencies listed.
4. What functions of identified agencies will be affected as a result of the dissolution?  


---

---

---
5. Are there any conditions requested by affected government agencies that will substantially affect or impact the proposed dissolution? Yes \_\_\_\_\_ No \_\_\_\_\_ (*please describe*)  


---

---

---
6. Are there any existing Contractual Agreements between the landowners and the city or district for the provision of services such as sewer or water service? Yes \_\_\_\_\_ No \_\_\_\_\_ (*please describe*)  


---

---

**F. Environmental Determination**

1. Indicate what the Lead Agency has done to comply with the requirements of the California Environmental Quality Act (CEQA).  
                   \_\_\_\_\_ Categorical Exemption                   \_\_\_\_\_ Negative Declaration (*with mitigations*)  
                   \_\_\_\_\_ Environmental Impact Report           \_\_\_\_\_ Other, *please specify* \_\_\_\_\_

Copies of the complete environmental documentation prepared by the Lead Agency (including the initial study, any technical reports, and any written comments or recorded public testimony relative to the environmental documents), and a copy of the Notice of Determination/Notice of Exemption, showing the date filed with the County Clerk shall be included as **“LAFCO Exhibit 4.”**

2. Was the environmental documentation (Notice of Intent/Notice of Preparation) circulated to the Butte Local Agency Formation Commission prior to adoption by the Lead Agency? Yes \_\_\_\_\_ No \_\_\_\_\_ (*If no, please explain why.*)  


---

---
3. Attach comments received from LAFCO, if any.

**G. Fiscal Information**

1. Explain how the district(s) operations have been financed and include all sources of revenue. If the district(s) received property tax revenue, indicate the amount received for the current fiscal year. \_\_\_\_\_  


---

---

---
2. Identify any bonds that have been authorized. If there is currently any outstanding bond debt, how much of the authorization has been used? \_\_\_\_\_  


---

---
3. Describe the current assets and liabilities of the district(s) to be dissolved. \_\_\_\_\_  


---

---
4. Describe how the assets of the district(s) will be distributed upon dissolution. \_\_\_\_\_  


---

---

---

5. Explain how the liabilities of the district(s) will be distributed upon dissolution. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. What provisions have been made for the employees of the district(s) upon dissolution? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**H. Support or Protest**

1. Provide a list or table labeled “**LAFCO Exhibit 6**” of all affected property owners within the district(s) to be dissolved that includes *(Note: A sample table for both a registered voter district and a landowner voter district is provided as LAFCO Form L-2.)*:

If it is a landowner voter district:

- ❖ Assessor’s Parcel Number (APN);
- ❖ Situs Address of parcel;
- ❖ Property owner(s) name and mailing address(es);
- ❖ Size of property in acres;
- ❖ Responses in favor of dissolution, opposed to dissolution or no response; and
- ❖ Assessed land value as determined by the County Assessor.

If it is a registered voter district:

- ❖ Assessor’s Parcel Number (APN);
- ❖ Situs Address of parcel;
- ❖ Property owner(s) name and mailing address(es);
- ❖ Size of property in acres;
- ❖ Responses in favor of dissolution, opposed to dissolution or no response;
- ❖ Assessed land value as determined by the County Assessor; and
- ❖ Number and names of Registered Voters at each site address.

**I. Public Notice Requirements**

1. Provide a mailing list of all property owners AND/OR registered voters (depending on type of district) located within the area to be dissolved AND a separate mailing list for those properties located within 300 feet of the exterior boundaries of the area to be dissolved. These mailing lists must be extracted from the most recent assessment rolls and registered voter rolls prepared by the County at the time the local agency adopts a resolution of application. Mailing lists shall be submitted with the application as “**LAFCO Exhibit 7.**” The mailing list shall also be submitted in electronic format compatible with WordPerfect or Microsoft Word. The mailing list shall include:

- ❖ The property owners and/or registered voters name residing at address;
- ❖ Mailing address and situs address;
- ❖ The Assessor’s Parcel Number; and
- ❖ Mailing labels.

**The LAFCO Application is intended to provide the Commission with all relevant data in order to make an informed decision. LAFCO staff will review each application for completeness within 30 days of submittal and inform the applicant in writing of any deficiencies or additional information required.**

---

## REQUIRED LAFCO EXHIBITS

- LAFCO Exhibit 1:** Certified copies of the Resolution of Application or Petition for Change of Organization.
- LAFCO Exhibit 2:** Boundary map of district(s) boundaries proposed for dissolution.
- LAFCO Exhibit 3:** Legal description of district(s) boundaries proposed for dissolution.
- LAFCO Exhibit 4:** Copies of the complete environmental documentation.
- LAFCO Exhibit 5:** Tax Exchange Agreement.
- LAFCO Exhibit 6:** List of all affected property owners and/or registered voters.
- LAFCO Exhibit 7:** Public Notice requirements mailing list.

L:\FORMS\Application-Petitions\Dissolution Supplement\Dissolution App 03-05.doc

**LAFCO Form "L-1"**  
**Petition for Proceedings Pursuant to the Cortese-Knox-Hertzberg Local Government  
Reorganization Act of 2000**

The undersigned hereby petition(s) the Local Agency Formation Commission of Butte County for approval of a proposed change of organization or reorganization, and stipulate as follows:

- 1) This proposal is made pursuant to Part 3, Division 3, Title 5 of the California Government Code (commencing with §56000, Cortese-Knox-Hertzberg Local Government Reorganization Act of 2000).
- 2) The specific change(s) of organization proposed (i.e., annexation to, detachment from, reorganization, etc.) is (are):
- 3) The boundaries of the territory included in the proposal are as described in Exhibit \_\_\_\_\_ attached hereto and by this reference incorporated herein.
- 4) This proposal is/is not (circle one) consistent with the sphere(s) of influence of the affected city and/or district(s). If the proposal is not consistent, a Sphere of Influence Amendment must be requested.
- 5) The reasons for the proposal (annexation, detachment, etc.) are:
- 6) The proposed change of organization or reorganization is requested to be made subject to the following terms and conditions:
- 7) The persons signing this petition have signed as: \_\_\_\_\_ registered voters \_\_\_\_\_ owners of land.
- 8) Do the petitioners include all landowners within the territory included within the proposal? \_\_\_yes \_\_\_no
- 9) If the formation of a new district is included in the proposal:
  - a) The principal act under which the district is proposed to be formed is: \_\_\_\_\_.
  - b) The proposed name of the new district is: \_\_\_\_\_.
  - c) The boundaries of the proposed new district are described in Exhibit \_\_\_\_\_ heretofore incorporated herein.
- 10) If the proposal includes the consolidation of special districts, the proposed name of the consolidated district is \_\_\_\_\_.
11. Butte LAFCO policies allow an application by petition only when the applicant provides satisfactory evidence that a diligent effort has been made to obtain a Resolution of Application from the affected public agency. Please indicate what effort was made to obtain such consent and the reasons why the public agency did not act on the applicant's request?

Wherefore, petitioners request that proceedings be taken in accordance with the provisions of '56000 et seq., of the California Government Code, and herewith affix signatures of the Chief petitioners (not to exceed three) as follows:

Date	Signature	Printed Name	Residence Address	Assessor's Parcel #
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

**LAFCO Form "L-2"**

<p align="center"><b>Exhibit "B"</b>  <b>Landowner Voter Proposal</b>  <b>Ownership List</b>  <b>Project Name</b></p>								
APN	NAME (mailing)	ADDRESS (situs)	ALV	Acres	RV	TRA	ZONE	Y/N
000-111-222	Doe, John (see situs)	353 JD Street Chico, CA 95928	\$29,799.00	.28	2	062011	R1/CM	Yes
Totals			\$29,799.00	0.28	2			

<p align="center"><b>Exhibit "B"</b>  <b>Registered Voter Proposal</b>  <b>Ownership List</b>  <b>Project Name</b></p>									
APN	NAME (mailing)	ADDRESS (situs)	REGISTERED VOTER NAME(S) (If other than owner)	ALV	Acres	RV	TRA	ZONE	Y/N
000-111-222	Doe, John (see situs)	353 JD Street Chico, CA 95928	John Voter 1 Jonna Voter 2	\$29,799.00	.28	2	062011	R1/CM	Yes
Totals				\$29,799.00	0.28	2			

**KEY:**

- APN:** Assessor=s Parcel Number. Can be obtained from the Butte County Assessor=s Office.
- NAME:** The legal landowner and mailing address. This may differ from Situs Address if parcel is not owner occupied.
- ADDRESS:** The actual physical site address of an individual parcel. May differ from Mailing Address if not owner occupied.
- REGISTERED VOTER NAME(S):** The name or names of all registered voters registered at the situs address.
- ALV:** Assessed Land Value. This is the official land value assessment established by the Butte County Assessor=s Office.
- Acres:** The actual size of the affected parcel.
- RV:** Registered Voters. This is the number of registered voters associated with the situs address. Can be obtained from the Butte County Registrar of Voters. NOTE: Registered voter information will ONLY be released to representatives of the affected agency, not the general public.
- TRA:** Tax Rate Area. This is a number assigned to each parcel by the State Board of Equalization for taxation purposes. Can be obtained from LAFCO or the Butte County Assessor=s Office.
- ZONE:** The land use designation (zoning) established by the governing agency.
- Y/N:** Yes/No. This reflects the landowners' position on the application. May be left blank if no indication from landowner is available.