Applegate Valley Rural Fire Protection District #9 Property Annexation Response Form
November 7, 2024
Owner's Name:
Property Address:
Mailing Address:
City, State, ZIP Code:
Phone Number:
Email Address:
Please indicate your choice regarding the proposed annexation of your property into the AVFD#9:
<ol> <li>□ I consent to the annexation of my property into the AVFD#9. I understand that:</li> <li>This will provide my property with fire protection services.</li> <li>AVFD#9 will send a letter certifying that fire protection services are being provided to my property.</li> <li>That my property will be subject to AVFD#9 tax assessments.</li> <li>There is no fee for the annexation process.</li> </ol>
<ul> <li>I do not consent to the annexation of my property into the AVFD#9. I understand that:         <ul> <li>Insurance companies cannot provide an insurance discount on my property if it is not annexed</li> <li>My property will automatically be annexed into the AVFD#9 if/when:</li></ul></li></ul>
Signature:
Date:
Please return this form within 90 days from the date of this letter to:
Applegate Valley Rural Fire Protection District #9  1095 Upper Applegate Rd.

Jacksonville, OR 97530