Fresno Local Agency Formation Commission Registered Voter Consent Form

Name of Proposal:		
Location of Proposal:		
Detach From:		
described opposite t	heir name and located within the t	stered voter residing within the property territory described in the attached legal on or reorganization as described above.
Name:	Address:	APN:
Signature:		Date:
Name:	Address:	APN:
Signature:		Date:
Name:	Address:	APN:
Signature:		Date:
Name:	Address:	APN:
Signature:		Date:
Name:	Address:	APN:
Signature:		Date:

The legal description of the territory proposed for change of organization or reorganization must be attached at the time consent is signed. Each individual listed as a registered voter must sign for the subject parcel(s). A current Assessor Parcel Number (APN) that may be obtained from your tax statement is sufficient to describe the property location.

Note: If you are an applicant for, or a participant in any proceedings on the agenda and have made a campaign contribution of \$250 or more to or for any of the Commission members, state law provides for disqualification of Commissioner voting, or even prohibition of such gifts. These restrictions also apply to agents of applications or participants. Please consult with the Commission staff as to the requirements of the Political Reform Act (Government Code Section 84308).

Reference: Section 56837 Govt. Code.