

**Annexation Information Report****For Local Government Aid Calculation Certified in 2012 For Aid Payable in 2013****Print**

Annexed Area - City or Town name: \_\_\_\_\_ County: \_\_\_\_\_

Annexing Jurisdiction - City name: \_\_\_\_\_ County: \_\_\_\_\_

Effective date of annexation: \_\_\_\_\_

**Partial Annexations****Part A**

This section is only to be completed if the net tax capacity of the annexed area for the assessment year preceding the effective date of the annexation exceeds 5 percent of the annexing city's net tax capacity for the same year.

*Values and net tax capacities are for Assessment Year 2010 and Taxes Payable 2011*

	<b>Annexed Area</b>	<b>Annexing City</b> (exclude annexed area)
Net tax capacity of annexed area: Source: (County Assessor)	_____	_____
Total real and personal market value of: Source: (County Assessor)	_____	_____
Total commercial/industrial market value of: Source: (County Assessor)	_____	_____
2010 population estimate of: Source: (State Demographer or Metropolitan Council)	_____	_____

**Complete Annexations****Part B**

This section is only to be completed if an entire township is annexed by the city.

	<b>Annexed Area</b>	<b>Annexing City</b> (exclude annexed area)
Pre-1940 housing units: Source: (US Census 2010)	_____	_____
Total housing units: Source: (US Census 2010)	_____	_____
Vehicle accidents for 2010: Source: (Dept of Public Safety)	_____	_____
2010 Population estimate: Source: (State Demographer or Metropolitan Council)	_____	_____
Household size: Source: (same as population)	_____	_____
Township/City levy (Taxes Payable 2011): Source: (County Auditor)	_____	_____
Total real and personal market value: Source: (County Assessor)	_____	_____
Total commercial/industrial market value: Source: (County Assessor)	_____	_____

**Fax or mail this completed form** on or before July 15, 2012 to:

Mail to: Minnesota Revenue, Property Tax Division, Mail Station 3345, St. Paul, MN 55146-3345

Fax to: 651-556-3128

*I hereby certify that this form is correct and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_