



BOUNDARY AND ANNEXATION SURVEY (BAS) MINOR CIVIL DIVISIONS (MCD)

Boundaries as of —

GENERAL INSTRUCTIONS

- To report changes to your entity, please complete this form.**
- It is important that all questions on the form are answered completely.
 - If there are no boundary changes to report, please email geo.bas@census.gov, call 1-800-972-5651, or respond electronically at <https://www.census.gov/programs-surveys/bas.html>.
 - Please do not return all of the maps. Sign and return only the maps with changes.
 - Return the completed form(s) and updated map(s) using the return label.
 - For further instructions on filling out this form, please refer to the BAS Respondent Guide.

A. Minor civil division	Type	County	State
-------------------------	------	--------	-------

BAS ID	STATE CODE	COUNTY CODE	MCD CODES	ANSI	FIPS
--------	------------	-------------	-----------	------	------

IMPORTANT – ANNOTATE EACH CHANGE ON THE MAP(S) WITH THE APPROPRIATE DOCUMENTATION ACCORDING TO THE INSTRUCTIONS PROVIDED IN THE BAS RESPONDENT GUIDE. Please update the map(s) USING THE APPROPRIATE COLORED PENCILS.

Question 1 NAME OR TYPE CHANGE – Please mark (X) the applicable boxes.

1a. Are the name and type (i.e. town, township, plantation, location, Reservation) correct as shown in Box A at the top of the page?

Yes – Continue with question 2. Effective date of change

No – Enter correction here. Date (Month/Day/Year)

Name	Type	
------	------	--

Question 2 LEGAL BOUNDARY CHANGES – Please mark (X) the applicable boxes.

Time period:

2a. Have there been any legal boundary changes to this minor civil division during the time period shown above?

Yes – Please record all legal change actions (annexations, deannexations and other actions) in the Documentation of Changes section of the form and update the map(s) USING THE ENCLOSED RED PENCIL. *Continue with question 2b.*

No – Continue with question 2b.

2b. Has your minor civil division had any other types of changes (i.e. consolidations/mergers, been annexed, been dissolved/disincorporated, etc.) that have affected its boundaries or governmental status during the time period shown above?

Yes – Complete question 2c. No – SKIP to question 2d.

<p>2c. This MCD has: Mark (X) one of the following</p> <p>(1) <input type="checkbox"/> consolidated/merged with</p> <p>(2) <input type="checkbox"/> been annexed by</p> <p>(3) <input type="checkbox"/> dissolved/disincorporated</p> <p>(4) <input type="checkbox"/> Other – Provide an explanation. →</p>	<p>Government: Enter the effective date of change and the Ordinance or Resolution Number:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Name of government with which minor civil division consolidated/merged</td> <td style="width: 30%;">Date/Number</td> </tr> <tr> <td>Name of government annexing this minor civil division</td> <td>Date/Number</td> </tr> <tr> <td>Name of government being dissolved/disincorporated</td> <td>Date/Number</td> </tr> <tr> <td></td> <td>Date/Number</td> </tr> </table>	Name of government with which minor civil division consolidated/merged	Date/Number	Name of government annexing this minor civil division	Date/Number	Name of government being dissolved/disincorporated	Date/Number		Date/Number	<p>(Month/Day/Year) Ordinance/Resolution No.</p>
Name of government with which minor civil division consolidated/merged	Date/Number									
Name of government annexing this minor civil division	Date/Number									
Name of government being dissolved/disincorporated	Date/Number									
	Date/Number									

2d. Are there any legal boundary changes that occurred before the period shown above that do not appear on the enclosed map(s)?

Yes – Please make the necessary updates to the map(s). *Continue with question 3.* No – Continue with question 3.

Question 3 OTHER CHANGES – Please mark (X) the applicable boxes.

3a. Besides legal changes, are there any boundary corrections that need to be made to your boundary on the map(s)?

Yes – Please correct the map(s) USING THE ENCLOSED RED PENCIL and the initials BC to indicate a boundary correction.

Enter the total number of boundary corrections that you made to the maps. → *Continue with question 4.*

No – Continue with question 4.

Question 4 CONTACT INFORMATION – Please fill in your contact information in the space provided below.

BAS Respondent		Mark (X) one government type for the BAS Respondent.	
Mailing Address <i>(The BAS Respondent is the person filling out this form.)</i>		<input type="checkbox"/> Local <input type="checkbox"/> County <input type="checkbox"/> Regional	
Name		Address	
Position			
Department		City	
Telephone	()	Ext.	State ZIP code
Fax	()		E-mail
Mark (X) this box if the BAS Respondent is the same as the BAS Mailing Contact. → <input type="checkbox"/>		Mark (X) this box if the BAS Respondent is the same as the Highest Elected Official. → <input type="checkbox"/>	

Question 5 CONTACT INFORMATION – Please fill in or correct the content information below.

BAS Mailing Contact		Mark (X) one government type for the BAS mailing contact.	
Mailing Address <i>(Provide address where BAS materials should be sent.)</i>		<input type="checkbox"/> Local <input type="checkbox"/> County <input type="checkbox"/> Regional	
Name		Address	
Position			
Department		City	
Telephone	()	Ext.	State ZIP code
Fax	()		E-mail

Highest Elected Official		<i>(for MCD only)</i>	
Mailing Address			
Name		Address	
Position			
Department		City	
Telephone	()	Ext.	State ZIP code
Fax	()		E-mail

RETURN FORMS TO:

**U.S. Census Bureau
National Processing Center
ATTN: BAS RETURNS, BLDG 63E
1201 East 10th Street
Jeffersonville, IN 47132**

REMINDER: Sign and date the signature box on all updated map sheets.

Thank you for your participation and timely response.

Questions? Telephone: 1-800-972-5651 E-mail: geo.bas@census.gov website: <https://www.census.gov/programs-surveys/bas.html>

SPECIAL INSTRUCTIONS *(If any)*

CENSUS USE ONLY			
Date processed		Clerk ID processed	
Date verified		Clerk ID verified	
Date form keyed		Date GPP updated	
S/S change <input type="checkbox"/>	Map received <input type="checkbox"/>	Map change <input type="checkbox"/>	
S/S no change <input type="checkbox"/>	Other map <input type="checkbox"/>	Map no change <input type="checkbox"/>	
PLAT/Description <input type="checkbox"/>	Map signed <input type="checkbox"/>	Letter <input type="checkbox"/>	

Documentation of Changes

MINOR CIVIL DIVISIONS

Minor civil division	Type	County	State
----------------------	------	--------	-------

BAS ID		STATE CODE		COUNTY CODE		MCD CODES	ANSI	FIPS
--------	--	------------	--	-------------	--	-----------	------	------

SPECIAL INSTRUCTIONS (If any)

Please follow the instructions below to review the preprinted entries for correctness and completeness and make changes as necessary. For new legal changes, use the provided spaces to print the requested information all annexations, deannexations and other changes that have occurred during the previous year(s).

Instructions for Entering Data in Columns

- (1) Change – Enter **A** for annexations, **D** for deannexations, **B** for boundary corrections, or **O** for other changes.
- (2) Authorization – Enter the authorization **type**. (**O** = Ordinance, **R** = Resolution, **L** = Local Law, **S** = State-level action, and **X** = Other)
- (3) Authorization – Enter the authorization **number** for the change you are reporting.
- (4) Date – Enter the *effective* date of the change. (**Month, day, year**)
- (5) Minor Civil Division (MCD) – Enter the **name of the minor civil division** in which the change occurred.
- (6) Area – Enter the **estimated size** (in tenths of acres) of the annexation, deannexation or other change.

Change Type A/D/O (1)	Authorization		Date Month/Day, Year (4)	Minor Civil Division Name (5)	Area Acres (tenths) (6)
	Type O/R/L/S/X (2)	Authorization Number (3)			

Documentation of Changes – Continued
MINOR CIVIL DIVISIONS

Minor civil division		Type			County		State
BAS ID	STATE CODE	COUNTY CODE	MCD CODES	ANSI	FIPS		

SPECIAL INSTRUCTIONS (If any)

Change Type A/D/O (1)	Authorization		Date Month/Day, Year (4)	Minor Civil Division Name (5)	Area Acres (tenths) (6)
	Type O/R/L/S/X (2)	Authorization Number (3)			

If additional space is needed, please use the BAS-3 "Documentation of Changes" form found in the BAS Respondent Guide.