PETITION FOR VOLUNTARY ANNEXATION				
This document is a public record under the North Carolina Public Record	ls Act and may be published on the	e Town's website or disclosed to third parties.		
Application #: 2023-00Z	Submittal Date:	1/24/2023		
Fee Paid \$ 200.00	Check #	online CC		
To The Town Council Apex, North Carolina				
1. We, the undersigned owners of real property, respect to the Town of Apex, ☐ Wake County, ☐ Chatham Cou		described in Part 4 below be annexed		
2. The area to be annexed is \square contiguous, \square non-corboundaries are as contained in the metes and bounds				
3. If contiguous, this annexation will include all intervenin G.S. 160A-31(f), unless otherwise stated in the annexa		railroads, and other areas as stated in		
OWNER INFORMATION				
COMAL DEEP PATEL Owner Name (Please Print)	O 7330113 Property PIN or Deed Bo			
551.358.7853		112 egmail. com		
Phone	E-mail Address	0.1		
DEEP HARVADAN PATEL	O 73301131 Property PIN or Deed Bo	71		
Owner Name (Please Print)	dpatel@kdpcpA.com			
Phone	E-mail Address	Car criticality		
Owner Name (Please Print)	Property PIN or Deed Bo	ook & Page #		
Phone	E-mail Address			
SURVEYOR INFORMATION				
Surveyor: Newcomb and	burveyors 1	LLC		
Phone: 919.847-1800 Fax:				
E-mail Address: justin en15-nc.com				

Annexation Summary Chart				
Property Information		Reason(s) for annexation (select all that apply)		
Total Acreage to be annexed:	1.74 ac	Need water service due to well failure		
Population of acreage to be annexed:		Need sewer service due to septic system failure		
Existing # of housing units:		Water service (new construction)		
Proposed # of housing units:		Sewer service (new construction)		
Zoning District*:		Receive Town Services		

*If the property to be annexed is not within the Town of Apex's Extraterritorial Jurisdiction, the applicant must also submit a rezoning application with the petition for voluntary annexation to establish an Apex zoning designation. Please contact the Department of Planning and Community Development with questions.

1/24/2023 2023-002 Application #: Submittal Date: COMPLETE IF SIGNED BY INDIVIDUALS: All individual owners must sign. (If additional signatures are necessary, please attach an additional sheet.) Marradan Signature Please Print Signature Please Print Signature STATE OF NORTH CAROLINA **COUNTY OF WAKE** a Notary Public for the above State and County, Sworn and subscribed before me, **Notary Public SEAL** In witness whereof, sald reprogration has caused this instrument to be executed by its President and attested by its Secretary by order of its Board of Directors, this the _____ day of _____, 20____. Corporate Name **SEAL** By: President (Signature) Attest: Secretary (Signature) STATE OF NORTH CAROLINA **COUNTY OF WAKE** _____, a Notary Public for the above State and County, Sworn and subscribed before me, _____ this the day of **Notary Public SEAL** My Commission Expires:

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