

PETITION FOR VOLUNTARY ANNEXATION

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Application #: 821
Fee Paid \$ 300.00

Submittal Date: 12/1/25
Check # 6863

TO THE TOWN COUNCIL APEX, NORTH CAROLINA

1. We, the undersigned owners of real property, respectfully request that the area described in Part 4 below be annexed to the Town of Apex, ☒ Wake County, ☐ Chatham County, North Carolina.
2. The area to be annexed is ☒ contiguous, ☐ non-contiguous (satellite) to the Town of Apex, North Carolina and the boundaries are as contained in the metes and bounds description attached hereto.
3. If contiguous, this annexation will include all intervening rights-of-way for streets, railroads, and other areas as stated in G.S. 160A-31(f), unless otherwise stated in the annexation amendment.

OWNER INFORMATION

Anthony (deceased) and Delois Richardson

Owner Name (Please Print)

919 266-4500

Phone

Anthony (deceased) and Delois Richardson

Owner Name (Please Print)

919 266-4500

Phone

Owner Name (Please Print)

Phone

0721448562

Property PIN or Deed Book & Page #

George@hamrick-galanis.com

E-mail Address

0721442048

Property PIN or Deed Book & Page #

George@hamrick-galanis.com

E-mail Address

Property PIN or Deed Book & Page #

E-mail Address

SURVEYOR INFORMATION

Surveyor: Priest, Craven & Associates, Inc. atten. Jody Deuel

Phone: 919 781-0300

Fax: 919 782-1288

E-mail Address: jdeuel@priestcraven.com pca@priestcraven.com

ANNEXATION SUMMARY CHART

Property Information

Total Acreage to be annexed: 16.29
Population of acreage to be annexed: 2
Existing # of housing units: 1
Proposed # of housing units: 72
Zoning District*: PUD-CZ

Reason(s) for annexation (select all that apply)

Need water service due to well failure ☐
Need sewer service due to septic system failure ☐
Water service (new construction) ☒
Sewer service (new construction) ☒
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 Planning Department with questions.

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COMPLETE IF SIGNED BY INDIVIDUALS:

All individual owners must sign. (If additional signatures are necessary, please attach an additional sheet.)

George N. Hamrick, Commissioner
Please Print

George N Hamrick Commissioner
Signature

Please Print

Signature

Please Print

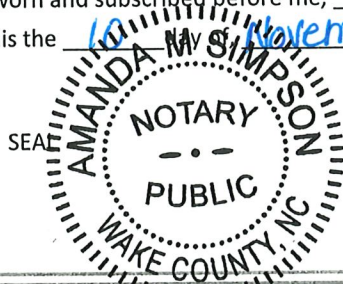
Signature

Please Print

Signature

STATE OF NORTH CAROLINA
COUNTY OF WAKE

Sworn and subscribed before me, the undersigned, a Notary Public for the above State and County,
this the 10 day of November, 2025.



Amanda M Simpson
Notary Public

My Commission Expires: 8/24/2030

COMPLETE IF A CORPORATION:

In witness whereof, said corporation 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

Sworn and subscribed before me, _____, a Notary Public for the above State and County,
this the _____ day of _____, 20____.

Notary Public

SEAL

My Commission Expires: _____

PETITION FOR VOLUNTARY ANNEXATION

Application #: _____

Submittal Date: _____

COMPLETE IF IN A LIMITED LIABILITY COMPANY

In witness whereof, _____ a limited liability company, caused this instrument to be executed in its name by a member/manager pursuant to authority duly given, this the ____ day of _____, 20____.

Name of Limited Liability Company _____

By: _____
Signature of Member/Manager

STATE OF NORTH CAROLINA
COUNTY OF WAKE

Sworn and subscribed before me, _____, a Notary Public for the above State and County,
this the ____ day of _____, 20____.

Notary Public

SEAL

My Commission Expires: _____

COMPLETE IF IN A PARTNERSHIP

In witness whereof, _____, a partnership, caused this instrument to be executed in its name by a member/manager pursuant to authority duly given, this the ____ day of _____, 20____.

Name of Partnership _____

By: _____
Signature of General Partner

STATE OF NORTH CAROLINA
COUNTY OF WAKE

Sworn and subscribed before me, _____, a Notary Public for the above State and County,
this the ____ day of _____, 20____.

Notary Public

SEAL

My Commission Expires: _____