

PETITION FOR VOLUNTARY ANNEXATION

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Application #: 825
Fee Paid \$ 300.00

Submittal Date: 2-4-2026
Check # CC

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

MARLOU S. BACON
STALEY C. SMITH, ET AL
Owner Name (Please Print)

919 362 7111
Phone

0723 2A 2701
Property PIN or Deed Book & Page #

staley@smithandsmithsurveyors.net
E-mail Address

Owner Name (Please Print)

Phone

Property PIN or Deed Book & Page #

E-mail Address

Owner Name (Please Print)

Phone

Property PIN or Deed Book & Page #

E-mail Address

SURVEYOR INFORMATION

Surveyor: SMITH & SMITH SURVEYORS, P.A.

Phone: 919 362 7111 Fax: n/a

E-mail Address: staley@smithandsmithsurveyors.net

ANNEXATION SUMMARY CHART

Property Information	Reason(s) for annexation (select all that apply)
Total Acreage to be annexed: <u>0.1010 and 0.1555</u>	Need water service due to well failure
Population of acreage to be annexed: <u>0</u>	Need sewer service due to septic system failure <input type="checkbox"/>
Existing # of housing units: <u>0</u>	Water service (new construction) <input type="checkbox"/>
Proposed # of housing units: <u>0</u>	Sewer service (new construction) <input type="checkbox"/>
Zoning District*: <u>RR</u>	Receive Town Services <input type="checkbox"/>
	<u>PUBLIC ROAD CONSTRUCTION</u> <input checked="" type="checkbox"/>

*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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Application #: 825

Submittal Date: 2-4-2026

COMPLETE IF SIGNED BY INDIVIDUALS:

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

ALEX BACON

Please Print

[Signature]

Signature

KYLE BACON

Please Print

[Signature]

Signature

LINDA MARLOU BACON

Please Print

[Signature]

Signature

HALLEY S. HOFFLEY

Please Print

[Signature]

Signature

STALEY C. SMITH

Please Print

[Signature]

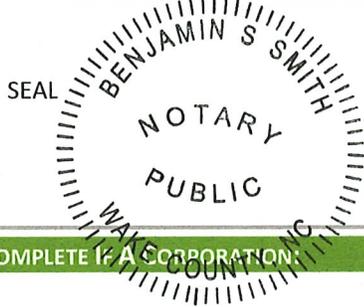
Signature

STATE OF NORTH CAROLINA
COUNTY OF WAKE

Sworn and subscribed before me, BENJAMIN S. SMITH, a Notary Public for the above State and County,
this the 29th day of JANUARY, 2020.

[Signature]

Notary Public



My Commission Expires: 10/6/30

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 PROVISION FINANCIAL RESOURCES OF NC BAPTISTS, INC.

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: _____

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ALEX BACON

Please Print

Signature

KYLE BACON

Please Print

Signature

LINDA MARLOU BACON

Please Print

Linda Marlou Bacon

Signature

HALEY S. HOFFLEY

Please Print

STALEY C. SMITH

Please Print

Signature

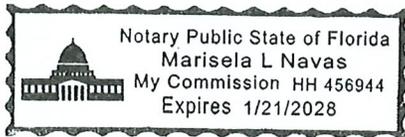
Signature

Florida
STATE OF NORTH CAROLINA
COUNTY OF WAKE Collier

Sworn and subscribed before me, Marisela Navas, a Notary Public for the above State and County, this the 20th day of January, 2026

Marisela Navas
Notary Public

SEAL



My Commission Expires: 01/21/2028

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 PROVISION FINANCIAL RESOURCES OF NC BAPTISTS, INC.

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: _____

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Submittal Date: 2-4-2026

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ALEX BACON

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Signature

KYLE BACON

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Signature

LINDA MARLOU BACON

Please Print

Signature

HALEY S. HOFFLER

Please Print

Signature

STALEY C. SMITH

Please Print

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

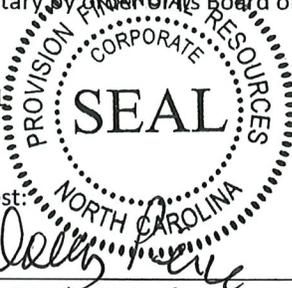
My Commission Expires: _____

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 and on its Board of Directors, this the 28 day of January, 2028.

Corporate Name PROVISION FINANCIAL RESOURCES OF NC BAPTISTS, INC.

SEAL



By: _____

President (Signature)

Attest: _____

Secretary (Signature)

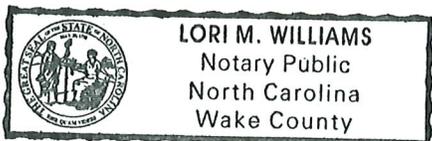
STATE OF NORTH CAROLINA
COUNTY OF WAKE

Sworn and subscribed before me, Lori M. Williams, a Notary Public for the above State and County,
this the 28 day of January, 2026.

Lori M Williams

Notary Public

SEAL



My Commission Expires: April 5, 2030

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: _____