



**CITY OF HENDERSONVILLE
COMMUNITY DEVELOPMENT DEPARTMENT
100 N. King Street, Hendersonville, NC 28792
Phone (828) 697-3010|Fax (828) 698-6185
www.hendersonvillenc.gov**

Petition Requesting Annexation

The following are the **required** submittals for a complete application for a Voluntary Annexation. Staff will not review applications until each item has been submitted and determined complete. By placing a check mark by each of the following items, you are certifying that you have performed that task.

- 1. Completed Application Form
- 2. A copy of the deed indicating ownership of the property.
- 3. A Survey Plat of the property prepared by a registered surveyor licensed to practice in the state of North Carolina.
- 4. A typed boundary description of the property.

A. Property Information

PIN(s): 9579-99-8724; 9579-98-0375, 9579-98-3527, 9579-99-4115

Address(es) / Location of Property: 205 Old Sunset Hill Rd, Hendersonville, NC 28792 &

Adjacent to: 395 Old Sunset Hill Rd Hendersonville, NC 28792

Does this property adjoin the present City Limits? X Yes No

Is the property within the ETJ? Yes X No

Reason for Annexation:

Connection to sanitary sewer

Office Use:

Date Received: _____ By: _____ Fee Received? Y/N

B. Property Owner Contact Information (if different from Applicant)

Joseph Harley Taylor Laura Suzanne Taylor

*Printed Owner Name (Authorized Representative for entities other than individuals)

N/A

Printed Company Name (if applicable, check corresponding box below)

Corporation Limited Liability Company Trust Partnership

Other:

x Joseph H Taylor Laura S Taylor
Property Owner/Authorized Representative Signature

Authorized Representative Title (if applicable - i.e. Member/Manager, President, etc.)

84 Nettie Way, Hendersonville, NC 28792

City, State, and Zip Code

828-674-0551

Telephone

taylorjh66@gmail.com

Email

* Property owner hereby grants permission to the City of Hendersonville personnel to enter the subject property for any purpose required in processing this application.

* If signed by an agent on behalf of the Owner, this petition MUST be accompanied by a Limited Power of Attorney signed by the property owner (s) and notarized, specifically authorizing the agent to act on the owner (s) behalf in signing this application. Failure of each owner, or their duly authorized agent, to sign, or failure to include the authority of the agent signed by the property owner, will result in an INVALID APPLICATION.

C. Additional Property Owner Contact Information

Julianne D. Albea

Gregory Martin Albea

* Printed Applicant Name

Date

Represented by (Hayes Albea, Broker/Seller Representative)

Printed Company Name (if applicable)

Corporation Limited Liability Company Trust Partnership

Other: _____

Gregory M. Albea
dotloop verified
07/19/24 9:07 PM EDT
UXV1-PBYK-W2UZ-BJ60

Julianne D. Albea
dotloop verified
08/07/24 9:24 AM EDT
FKXP-8ESY-2QEK-1OUI

Property Owner Signature

Owner

Property Owner Title (if applicable)

430 S. Mills River Rd

Address of Property Owner

Mills River, NC 28759

City, State, and Zip Code

(828) 606-8007

Telephone

hayesalbea@kw.com

Email