

Application Fee: \$ 150.00

Note: Application must be complete and Application fee must be paid at time of submittal
CASE#: _____ DATE: _____ RECEIPT: _____

REQUEST FOR CONTIGUOUS ANNEXATION:

The attached petition must be accompanied by a boundary map of the property to be annexed showing its relationship with the current town limit line. The legal description (metes and bounds) must appear on or be attached to the annexation petition.

The petition must be signed by the owners of all property included in the annexation request. In the case of a corporation, the petition must be signed by the President of the Corporation and attested by its Secretary.

Please provide four (4) copies of the map, one (1) of the petition and a \$150.00 application fee.

Any zoning vested rights acquired pursuant to G.S. 160A-385.1 or G.S. 153A-344.1 must be declared and identified in this petition. We further acknowledge that failure to declare such rights on this petition shall result in a termination of vested rights previously acquired for the property.

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PETITION REQUESTING ANNEXATION

NORTH CAROLINA
WAKE COUNTY

DATE: _____

Extension of the Corporate Limits)
of the Town of Garner as provided)
in Part I, Article 4A, Chapter 160)
of the General Statutes)

TO THE TOWN COUNCIL OF THE TOWN OF GARNER:

1. We the undersigned owners of real property respectfully request that the area described in Paragraph 2 below to be annexed into the Town of Garner.
2. The area to be annexed is contiguous to the Town of Garner and the boundaries of such territory are as follows:
 - a) Attach metes and bounds description
3. A map is attached hereto showing the area proposed for annexation in relation to the primary corporate limits of the Town of Garner.

Name of Development:			
Property Location:		Wake County (PIN):	
Total Acreage:		Deed Book/Page # Plat Book#	
Owner: _____			
Mailing Address:			
_____		_____	
Owner Print	Date	Owner Signature	Date

TOWN OF GARNER
www.GarnerNC.gov

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Corporation Signatures:

Name:

Address:

1. _____

2. _____

3. _____

Name of Company/Corporation

Address

City, State, Zip Code

President/Registered Agent

Signature

Attest: _____

Secretary