CITY OF HICKORY
APPLICATION FOR VOLUNTARY ANNEXATION

DATE SUBMITTED:_____

TO THE CITY COUNCIL OF THE CITY OF HICKORY, NORTH CAROLINA:

I (We), the undersigned, do hereby respectfully make application and petition for voluntary annexation into the municipal limits of the City of Hickory, and have provided an annexation plat meeting the requirements of the City of Hickory

1. The property be voluntarily annexed is located on _____ _____between_____and_____ _____ and is shown in more detail on the attached survey.

2. PIN NO. (S) :_____

3. Physical (Street) Address: _____

4. The property is owned by: (please print) _____
(Attach a copy of the most recent deed.)

   Owner Information:

   Name: _____

   Address: _____

   Phone Number: _____

5. The petition is submitted by: _____

   Agent Information:

   Name: _____

   Address: _____

   Phone Number: _____

6. If annexation is approved by the Hickory City Council, and if the property(s) is not currently zoned by the City of Hickory, the applicant would request that the property be placed into a _____ zoning district.

7. WATER AND SEWER AVAILABLILTY AND CONNECTIONS

We, the undersigned property owner(s), herby understand and agree we shall be responsible for all costs associated with providing for extensions and/or connections to the City of Hickory public utility system (water and sewer). This includes all design, permitting, construction, legal and applicable City of Hickory Tap Fees. Furthermore, we shall be responsible for obtaining any and all necessary easements and encroachment agreements needed to provide for such extensions or connections and provide those to the City of Hickory as appropriate.

The undersigned owner further acknowledges, they shall be responsible for any future utility extensions required to serve the property due to subdivision of the property.

8. OWNER'S AFFIDAVIT

We, the undersigned property owners(s), hereby certify that the information contained herein and submitted in support of this application is true and correct.

_____	_____
Printed Name of Property Owner(s)	**Signature of Property Owner(s)**
_____	_____
Address of Property Owner(s)	**Telephone Number of Property Owner(s)**

(Please choose the appropriate notary block)

State of _____ – County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____ personally appeared before me this day and acknowledged the due execution of this foregoing instrument for the purposes expressed herein. Witness my hand and Notarial stamp or seal, this _____ day of _____, 20____.

My Commission Expires: _____ _____
Notary Public

State of _____ – County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____ personally came before me this day an acknowledged the he / she is the _____ of _____ corporation / limited liability corporation / general partnership / limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity he /she signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this _____ day of _____, 20_____.

My Commission Expires: _____ _____
Notary Public

Annexation Plat Checklist

The survey map of your property is not acceptable as an annexation plat. Therefore, a Professional Land Surveyor must prepare an annexation plat of the area to be annexed. The surveyor will complete the checklist below as part of the preparation of the plat. The checklist must be returned with the plat before the review of the petition will begin.

Annexation know as: _____ Date: _____

To expedite the annexation process, you must submit two (2) copies of an annexation plat that has the information specified below, and shown on its face.

____ Title ("Satellite Annexation" or "Contiguous Annexation").

____ Title (known as _____) *Should include the name of the property owner(s).

____ Address (Physical Address if property has one).

____ Parcel Identification Number (PIN).

____ Date of Survey

____ Township.

____ County.

____ Map scale (Both numeric and graphic).

____ Existing City Limits if contiguous shown as bold broken lines as labeled as "Existing City Limits". Also list the plat book and page where the existing City Limits may be found. (For assistance, contact the City Surveyor's Office at 828.323.7414).

____ New City Limits line(s) shown as bold solid lines and labeled "New City Limit Line".

____ Bearing and distances for all City Limits lines.

____ Area in Acres.

____ North Arrow.

____ Mayor / City Clerk Certification (see sample plat).

____ Notary Certification for City Clerk.

____ Map Review Officer Certification.

____ Grid Tie – If within 2,000 feet of grid monument tie to grid and rotate bearings north to grid north. If not, tie to intersection of two streets.

____ Type & size of existing property corner markers.

____ Vicinity map.

____ Adjacent owner's names, Deed Book and Page number for each adjacent owner.

____ Adjacent street names.

____ If petition consists of a satellite annexation, the map must show the area proposed for annexation with relation to the primary corporate limits of the City of Hickory, (i.e., distance between nearest line of area being annexed and existing contiguous city limits). When there is question as to whether the area may be closer to another city than the annexing city, the map shall also show the area proposed for annexation with relation to the primary corporate limits of the other city.

Professional Land Surveyor Information

Name: _____

Address: _____

Telephone Number: _____

E-mail: _____

- **ANNEXATION PLATS MUST BE DRAWN SO THE ANNEXATION AREA IS TAKEN TO THE MIDDLE OF ALL ADJACENT STREETS OR PUBLIC RIGHT-OF-WAYS. PLATS NOT DRAWN IN THIS MANNER WILL NOT BE ACCEPTED.**

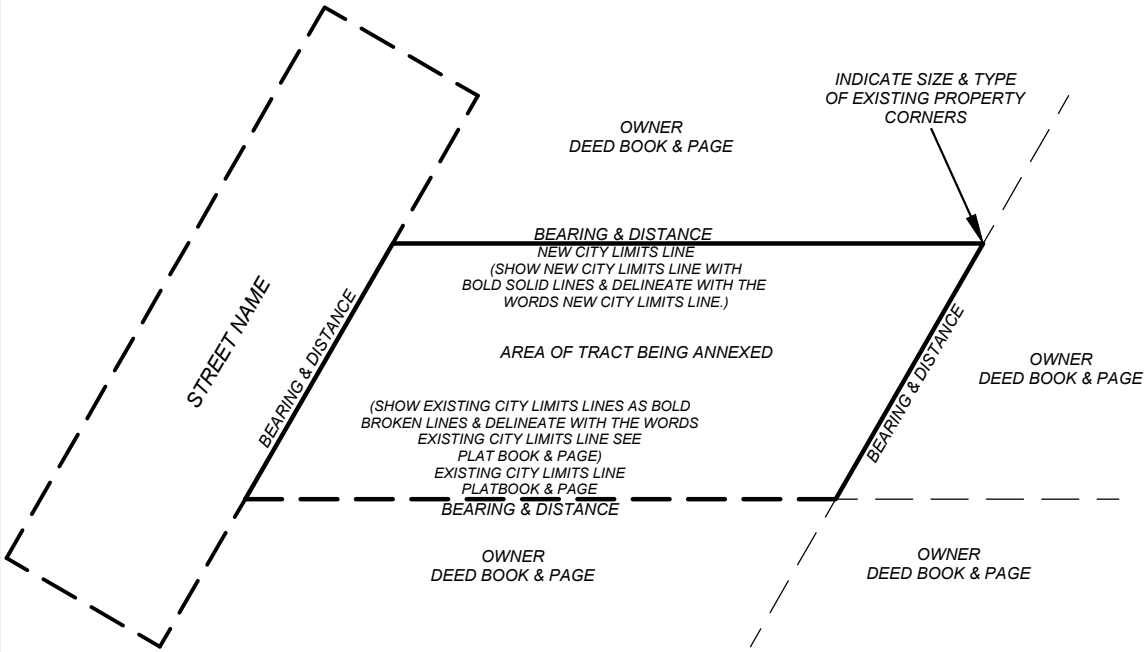
- **ANNEXATION PETITIONS MUST BE SUBMITTED ALONG WITH A WRITTEN METES AND BOUNDS DESCRIPTION OF THE AREA TO BE ANNEXED.**

NORTH - GRID IF TIED

NOTES:
THIS IS A SAMPLE MAP AND IS INTENDED ONLY TO DELINEATE DATA REQUIRED BY THE CITY OF HICKORY ON ANNEXATION MAPS.
GRID TIE IF WITHIN 2000' OF HORIZONTAL CONTROL. IF NO HORIZONTAL CONTOL, DISTANCE TO NEAREST INTERSECTION WILL SUFFICE.
PLAT NEEDS TO BE SUITABLE FOR RECORDING.
USE EITHER SATELLITE OR CONTIGUOUS TO DESCRIBE THE TYPE OF ANNEXATION.
IF SATELLITE, THE ANNEXATION MUST SHOW BEARING AND DISTANCE TO CLOSEST CONTIGUOUS CITY LIMITS.
THE SURVEYOR CAN USE TITLE BLOCK OF PREFERENCE BUT IT MUST CONTAIN INFORMATION SHOWN IN THE EXAMPLE TITLE BLOCK.

SATELLITE ANNEXATION
OR
CONTIGUOUS ANNEXATION
BY THE
CITY OF HICKORY
KNOWN AS THE
JIM SMITH PROPERTY
CITY OF HICKORY
_____ TOWNSHIP, _____ COUNTY
NORTH CAROLINA
SCALE: _____ DATE: _____

BAR SCALE



N.C.G.S. 47-30 (j)
THE PROVISIONS OF THIS SECTION SHALL NOT APPLY TO BOUNDARY PLATS OF AREAS ANNEXED BY MUNICIPALITIES NOR TO PLATS OF MUNICIPAL BOUNDARIES, WHETHER OR NOT REQUIRED BY LAW TO BE RECORDED.

NORTH CAROLINA CATAWBA COUNTY

THE PROPERTY ON THIS PLAT WAS DULY APPROVED FOR ANNEXATION BY THE CITY COUNCIL OF THE CITY OF HICKORY ON THE_____ DAY OF_____ ,20__ AND AN ORDINANCE DULY ADOPTED AND CERTIFIED AND THIS MAP IS HEREBY ORDERED TO BE RECORDED IN ACCORDANCE WITH NCGS 160A-29.

BY: _____
_____, MAYOR, CITY OF HICKORY

ATTEST: _____
_____, CITY CLERK

DATE: _____

STATE OF NORTH CAROLINA
COUNTY OF CATAWBA

I, A NOTARY PUBLIC OF THE COUNTY AND STATE AFORESAID, CERTIFY THAT _____, PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THAT SHE IS CITY CLERK OF THE CITY OF HICKORY, A NORTH CAROLINA MUNICIPAL CORPORATION, AND THAT BY AUTHORITY DULY GIVEN AND AS THE ACT OF THE CITY COUNCIL OF THE CITY OF HICKORY, THE FOREGOING INSTRUMENT WAS SIGNED IN ITS NAME AND BY ITS MAYOR, SEALED WITH ITS CORPORATE SEAL, AND ATTESTED BY HER AS ITS CLERK.

WITNESS MY HAND AND OFFICIAL STAMP OR SEAL THIS _____ DAY OF _____, 20___.

NOTARY PUBLIC _____

MY COMMISSION EXPIRES _____

STATE OF NORTH CAROLINA

COUNTY OF CATAWBA

I, _____, A REVIEW OFFICER OF CATAWBA COUNTY CERTIFY ON THIS _____ DAY OF_____ ,20___, THAT THE MAP TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

_____
REVIEW OFFICER