



VILLAGE OF MARVIN

10004 New Town Road | Marvin, NC | 28173 | Tel: (704) 843-1680 | Fax: (704) 843-1660 | www.marvinnc.org

VILLAGE OF MARVIN VOLUNTARY ANNEXATION REQUIREMENTS

Criteria for Voluntary Annexation in Marvin (the Council may waive these requirements for extenuating circumstances)

- Subdivisions requesting voluntary annexation must have at least 95% participation to be considered for voluntary annexation.
- The annexation must provide the Village with a contiguous identity
- The Village will perform an economic impact study before considering any voluntary annexation petitions

If a property involved in the voluntary annexation changes ownership before the Annexation Ordinance is adopted, and the new owners protest the annexation, the entire petition would fail. Also, if any one property withdraws from or is added to the annexation petition prior to the Annexation Ordinance being adopted, the entire petition would fail. You may add signatures to existing petitions.

Any annexation agreements between the Village of Marvin and neighboring municipalities may prohibit the Village from annexing some properties in the vicinity regardless of whether or not they meet the criteria contained in this policy. Property owners should check with the Village Clerk to determine if any such annexation agreements may apply to their property.

VOLUNTARY ANNEXATION SUBMITTAL DEADLINES

In order to have annexation effective on July 1, annexation petitions must be complete and submitted by March 31.

In order to have annexation effective on January 1, annexation petitions must be complete and submitted by September 30.

Approved by the Village Council 5/11/10

**VILLAGE OF MARVIN
VOLUNTARY ANNEXATION PETITION**

To the Council of the Village of Marvin, Union County, NC:

We, the Undersigned Owners of Real Property respectfully request that the area described below be annexed into the Village of Marvin, Union County, North Carolina. The Area to be annexed is contiguous to the Village of Marvin of Union County, North Carolina and the boundaries of such territory are as follows:

TAX PARCEL NUMBER(s): _____

Check the box to indicate that a copy of the parcel deed(s) is included with this petition.

Respectfully submitted, this the _____ day of _____, 20_____.

Number of persons in household _____

**** Do you declare vested rights?** Yes No

Owner 1

Full Name: _____

Signature: _____ Telephone Number _____

Residence Address: _____

The following information is required by the Voting Rights Act, 42 U.S.C. 1973c:

RACE: Caucasian Afro-American Hispanic Native American Asian American

Owner 2

Full Name: _____

Signature: _____ Telephone Number _____

Residence Address: _____

The following information is required by the Voting Rights Act, 42 U.S.C. 1973c:

RACE: Caucasian Afro-American Hispanic Native American Asian American

**** We acknowledge that any zoning vested rights acquired pursuant to NCGS §160A-385.1 or NCGS §153A-344.1 must be declared and identified on 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.**

=====

OFFICE USE ONLY:

Date Received: _____

Staff Signature: _____