

Incomplete submissions will not be accepted. Please check all items carefully.

1. Application Type	(O) notions provide o				
Please indicate the type of application you are submitting. If you are applying for two (2) actions, provide a separate application for each action. In addition to the application, the <u>submission process</u> for each application type can be found at					
http://www.huntersville.org/Departments/Planni  □ CHANGE OF USE □ COMMERCIAL SITE PLAN □ CONDITIONAL REZONING □ GENERAL REZONING □ MASTER SIGNAGE PROGRAM □ REVISION to □ SPECIAL USE PERMIT	SUBDIVISION CATEGORIES: Per the Huntersville Subdivision Ordinance  SKETCH PLAN PRELIMINARY PLAN FINAL PLAT (includes minor and exempt plats) FINAL PLAT REVISION FARMHOUSE CLUSTER				
2. Project Data					
Date of Application 1/10/17 (Updated from 5/24/16)  Name of Project Skybrook North  Location Poplar Tent Road and Huntersville-Concord Road	Phase # (if subdivision) NA				
Parcel Identification Number(s) (PIN) 011-102-01,13, 011-	103-01,03,04,07,09,10,11,13,16,17,18,19, 021-081-04,06				
Current Zoning District TR(CD) & R Proposed District (for rezonings only) TR-CD (New)					
Property Size (acres) 175.05 Street Frontage (feet)					
Current Land Use Vacant					
Proposed Land Use(s) Residential (Single Family)					
Is the project within Huntersville's corporate limits?  Yes No If no, does the applicant intend to voluntarily annex?					
3. Description of Request					
Briefly explain the nature of this request. If a separate sheet is necessary, please attach to this application.  Remove a road crossing over PNG existing gas line, make minor internal revisions to the overall layout, increase open space & tree save					
and increase density from 180 to 220 single family lots.					

## 4. Site Plan Submittals

Consult the particular type of *Review Process* for the application type selected above. These can be found at. http://www.huntersville.org/Departments/Planning/PermitsProcess.aspx.

## 5. Outside Agency Information

Other agencies may have applications and fees associated with the land development process. The Review Process list includes plan documents needed for most town and county reviewing agencies.

For major subdivisions, commercial site plans, and rezoning petitions please enclose a copy of the Charlotte-Mecklenburg Utility *Willingness to Serve* letter for the subject property.

6. Signatures			
11-4	of Coly II Prin	ted Name_John T	. Coley IV
*Applicant's Signature	20 Hally Springs	NC 27540	
Address of Applicant P.O. Bo	ox so nony springs,	140 27040	
Email coley@bpropnc.co	om		
Property Owner's Signature (if d	lifferent than applicant)		
Printed Name John T. Cole	ey IV		WAR COMMISSION OF THE COMMISSI
Property Owner's Signature (if dependent of the Property Owner's Address P.O.)	. Box 38 Holly Springs, No	C 27540 <sub>Email</sub> col	ey@bpropnc.com
Property Owner's Address  * Applicant hereby grants permission to processing this application.	the Town of Huntersville personnel to		
Skybrook, LLC.	Brian Pace	704-3651208	bpace@pacedevelop.com
Development Firm	Name of contact	Phone	Email
Yarbrough-Williams & Houle, Inc.	Marc Houle	704-556-1990	march@y-wh.com
Design Firm	Name of contact	Phone	Email
Please provide the name and A rezoning petition. If additional s	space is needed for signatures	s, attach an addendu	um to this application.
If Applying for a Conditional Every owner of each parcel incithis petition. If signed by an agowner (s) and notarized, specificallure of each owner, or their signed by the property owner, wignatures, attach an addending	luded in this rezoning petition, ent, this petition MUST be accided authorizing the agent to duly authorized agent, to sign, will result in an INVALID PETI lum to this application.	companied by a state act on the owner (s), or failure to include TION. If additional	behalf in filing this petition. the authority of the agent space is needed for
Signature, name, firm, address	, phone number and email of	Duly Authorized Age	ant by owner needed below.
John T. Coley IV, Skybrook, L	LC. P.O. Box 38 Holly Sprin	gs, NC 27540 919-l	869-2702 coley@bpropnc.com
If Applying for a <u>Subdivision</u> . By signature below, I hereby as a quasi-judicial procedure and at the public hearing.	knowledge my understanding	g that the Major Sub nmissioners shall <b>on</b>	division Sketch Plan Process is ily occur under sworn testimony
Contact Information			

Town of Huntersville

Planning Department

Huntersville, NC 28070

PO Box 664

Phone:

Website:

Physical Address:

Fax:

704-875-7000

704-992-5528

105 Gilead Road, Third Floor

http://www.huntersville.org/Departments/Planning.aspx



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☑ CONDITIONAL REZONING	☐ SKETCH PLAN				
☐ GENERAL REZONING	☐ PRELIMINARY PLAN				
☐ MASTER SIGNAGE PROGRAM	☐ FINAL PLAT(includes minor and exempt				
☐ REVISION to	plats)  FINAL PLAT REVISION				
☐ SPECIAL USE PERMIT	☐ FARMHOUSE CLUSTER				
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*Applicant's Signature	Afforder in	Printed Name 6	We H Jordan			
Address of Applicant	1 BOX 97 J	2 Cary,	1000 213/1			
Email George C	6 H Josdan	, com'	manger			
Property Owner's Signature (if	different than applicant)		Jurdan Estate			
Printed Name			20/-11			
Property Owner's Address Email  * Applicant hereby grants permission to the Town of Huntersville personnel to enter the subject property for any purpose required in processing this application.						
Development Firm	Name of contact	Phone	Email			
Design Firm	Name of contact	Phone	Email			
If Applying for a General Rezoning:  Please provide the name and Address of owner(s) of fee simple title of each parcel that is included in this rezoning petition. If additional space is needed for signatures, attach an addendum to this application.  If Applying for a Conditional Rezoning:  Every owner of each parcel included in this rezoning petition, or the owner (s) duly authorized agent, must sign this petition. If signed by an agent, this petition MUST be accompanied by a statement signed by the property owner (s) and notarized, specifically authorizing the agent to act on the owner (s) behalf in filling this petition. 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 PETITION. If additional space is needed for signatures, attach an addendum to this application.						
Signature, name, firm, address, phone number and email of Duly Authorized Agent by owner needed below:						
If Applying for a Subdivision: By signature below, I hereby acknowledge my understanding that the Major Subdivision Sketch Plan Process is a quasi-judicial procedure and contact with the Board of Commissioners shall only occur under sworn testimony at the public hearing  Contact Information						
Town of Huntersville	Phone:	704-875-7000				
Planning Department	Fax:	704-992-5528				
PO Box 664	Physical Address:	105 Gilead Road, Third				
Huntersville, NC 28070	Website:	<u>nττp://www.huntersville</u>	.org/Departments/Planning.aspx			