

Text Amendment Application

Incomplete submissions will not be accepted. **Applicant Data** 06.01.2017 Date of Application Address 105 Phone Number (home) 704766. 2212 (work) Email ___ Fee Text Amendment to the Zoning/Subdivision Ordinance Fee \$400.00 Type of Change New Addition to text of Zoning Ordinance / Subdivision Ordinance / Other Revision/Modification to text of Zoning Ordinance / Subdivision Ordinance / Other Description of Change (If possible, please provide a Word document of the proposed text change) Proposed text amendment will affect the following: he following:

Article: 3.21, 3.22, 3.2.4, Section: 3.2.11-3.2.14, 780 pen spore, 8.14, 12.2.1 Ordinance: Wina Current Text: ___ J Sll attachment Proposed Text: Sel attamment Reason for requested change (attach additional sheets if necessary):

NOTE: If the proposed text amendment effects property located along Hwy 73; is 2000 feet from an adjoining municipality, and/or the Mountain Island and Lake Norman Watersheds, additional peer review is required.

Signatures

I hereby certify that the information presented by me in this application is accurate to the best of my knowledge, information and belief.

Applicant Signature:

_Date: _

5.31.17

Contact Information

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