



General Application

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

1. Application Type

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 submission process for each application type can be found at**

<http://www.huntersville.org/Departments/Planning/PermitsProcess.aspx>

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| <ul style="list-style-type: none"><input type="checkbox"/> CHANGE OF USE<input type="checkbox"/> COMMERCIAL SITE PLAN<input type="checkbox"/> CONDITIONAL REZONING<input checked="" type="checkbox"/> GENERAL REZONING<input type="checkbox"/> MASTER SIGNAGE PROGRAM<input type="checkbox"/> REVISION to _____<input type="checkbox"/> SPECIAL USE PERMIT | <p>SUBDIVISION CATEGORIES: <i>Per the Huntersville Subdivision Ordinance</i></p> <ul style="list-style-type: none"><input type="checkbox"/> SKETCH PLAN<input type="checkbox"/> PRELIMINARY PLAN<input type="checkbox"/> FINAL PLAT (includes minor and exempt plats)<input type="checkbox"/> FINAL PLAT REVISION<input type="checkbox"/> FARMHOUSE CLUSTER |
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2. Project Data

Date of Application 10/1/2017

Name of Project Town Center - General Rezoning Phase # (if subdivision) _____

Location South Side of Gilead Road; West of the Town Center Building (Town Offices & Discovery Place Kids)

Parcel Identification Number(s) (PIN) 01711619, 01711618, 01711643, 01711617, 01711627, 01711616, 01711615 (a portion of)

Current Zoning District TC(CD) Proposed District (for rezonings only) TC

Property Size (acres) +/- 2.25 ac Street Frontage (feet) 185'

Current Land Use Vacant

Proposed Land Use(s) No use proposed

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.

This rezoning is to remove the existing Conditional District (CD) Overlay.

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

*Applicant's Signature  Printed Name Gerry Vincent

Address of Applicant PO Box 664, Huntersville, NC 28070

Email brichards@huntersville.org, 704-766-2218

Property Owner's Signature (if different than applicant) _____

Printed Name Gerry Vincent, Town of Huntersville

Property Owner's Address PO Box 664, Huntersville, NC 28070 Email _____

* Applicant hereby grants permission to the Town of Huntersville personnel to enter the subject property for any purpose required in processing this application.

N/A

Development Firm	Name of contact	Phone	Email
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N/A

Design Firm	Name of contact	Phone	Email
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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 filing 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 Floor
Huntersville, NC 28070	Website:	http://www.huntersville.org/Departments/Planning.aspx