



**CITY OF HENDERSONVILLE  
COMMUNITY DEVELOPMENT DEPARTMENT**

**100 N. King Street, Hendersonville, NC 28792**

**Phone (828) 697-3010|Fax (828) 698-6185**

**www.hendersonvillenc.gov**

**Conditional Zoning District Petition  
Section 7-4 and Article 11 City Zoning Ordinance**

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The following are the **required** submittals for a complete application for rezoning a property or properties to a Conditional Zoning District. Staff will not review applications until each item has been submitted and determined complete. By placing a check mark by each of the following items, you are certifying that you have performed that task.

- ☒ 1. Scheduled Pre-Application meeting with Planning Staff
  - 1a. Completed Neighborhood Compatibility Meeting – Contact Staff & Review CZD Checklist for additional information
- ☒ 2. Water and Sewer Availability Request
- ☒ 3. Completed Application Form
- ☒ 4. Completed Signature Page (completed Owner's Affidavit if different from applicant)
- ☒ 5. Completed Site Plan as described in Section 7-4.3-1 of the City Zoning Ordinance
- ☒ 6. Detailed explanation of any Proposed Development Description
- ☒ 7. Application Fee

**Note: Additional Approvals prior to the issuance of a Zoning Compliance Permit may include, but are not limited to the following:**

- **Henderson County Sedimentation & Erosion Permit**
- **Stormwater Management Plan**
- **Utility Approval**
- **NCDOT Permit**
- **Any other applicable permits as determined by the Community Development**

**[Application Continued on Next Page]**

Office Use:

**Date Received:** \_\_\_\_\_ **By:** \_\_\_\_\_ **Fee Received? Y/N**

**A. Applicant Contact Information**

Mike Washburn

\* Printed Applicant Name

Printed Company Name (if applicable)

☐ Corporation


☐ Limited Liability Company

☐ Trust

☐ Partnership

☒ Other: Individual

DocuSigned by:



Applicant Signature

Applicant Title (if applicable)

PO Box 898

Address of Applicant

Sullivans Island, SC 29842

City, State, and Zip Code

843-343-3947

Telephone

emwashburn@gmail.com

Email

\* Signature of the property owner acknowledges that if the property is rezoned, the property involved in this request is bound to the use(s) authorized, the approved site plan and any conditions imposed, unless subsequently changed or amended as provided for in the Zoning Ordinance.

**[Application Continued on Next Page]**

**Additional Property Owners: (Signature indicates intent that this page be affixed to Application.)**

Richard Thomas

\*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership

☒ Other: Individual

*Richard L Thomas* dotloop verified  
10/13/21 10:04 PM EDT  
MG85-XG3N-BED6-F970

Property Owner Signature

Property Owner Title (if applicable)

830 4th Ave W, Hendersonville, NC 28739

City, State, and Zip Code

Telephone

Email

\* Property owner hereby grants permission to the City of Hendersonville personnel to enter the subject property for any purpose required in processing this application.

\* If signed by an agent on behalf of the Owner, this petition MUST be accompanied by a Limited Power of Attorney signed by the property owner (s) and notarized, specifically authorizing the agent to act on the owner (s) behalf in signing this application. 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 APPLICATION.

**Additional Property Owners: (Signature indicates intent that this page be affixed to Application.)**

Charles W Thomas and Dora E Thomas Revocable Trust dated August 31, 2017

\*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation

☐ Limited Liability Company



Trust

☐ Partnership

☐ Other: \_\_\_\_\_

x 

Property Owner Signature

Trustee

Property Owner Title (if applicable)

5050 E St Andrews Dr Tucson AZ 85718

City, State, and Zip Code

Telephone

Email

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**Additional Property Owners: (Signature indicates intent that this page be affixed to Application.)**

James R Thomas

\*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation

☐ Limited Liability Company

☐ Trust

☐ Partnership



☒ Other: Individual

Property Owner Signature

Attorney in fact for James R Thomas

Property Owner Title (if applicable)

830 4th Ave W Hendersonville, NC 28739

City, State, and Zip Code

Telephone

mtv8650@gmail.com

Email

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**Additional Property Owners: (Signature indicates intent that this page be affixed to Application.)**

Mary T Viera

\*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation

☐ Limited Liability Company

☐ Trust

☐ Partnership



Other: Individual

Property Owner Signature

*[Handwritten Signature]* atty for Mary T. Viera

Property Owner Title (if applicable)

830 4th Ave W Hendersonville, NC 28739

City, State, and Zip Code

Telephone

mtv8650@gmail.com

Email

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