

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

The following are the <u>required</u> 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
- [N/A] 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				
Dennis J. Dorn				
* Printed Applicant	Name			
CD-MAT LLC at N	C.I.I. Company			
Printed Company N	Name (if applicable)			
☐ Corporation	☑Limited Liability Company	☐ Trust	☐ Partnership	
□ Other:	\sim			
0-0	1)			
Applicant Signature				
Manager				
Applicant Title (if a	applicable)			
847 Tracy Grove F	Road			6
Address of Applica	nt			
Flat Rock, NC 287	31			
City, State, and Zip	Code			
828-243-9100				
Telephone				
donniedornnama@	Shotmail com			
dennisdornnams@	gnounan.com			
Email				

[Application Continued on Next Page]

^{*} 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.

B. Property Owner Contact Information (if different from Applicant)
Thomas H and Sherry S Thompson
*Printed Owner Name
Printed Company Name (if applicable)
☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership
□ Other:
Thomas 7. Thompson Slux & Slongon
Property Owner Signature
Property Owner Title (if applicable)
Dana, NC 28724
City, State, and Zip Code
828-329-1304
Telephone
thomasthompson@bellsouth.net thomashthompson@bellsouth.net
Email

Note: Additional Owner Signature pages attached.

^{*} 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.

C. Property Information
Name of Project: AAA Storage Expansion
PIN(s): 9579-75-6816
Address(es) / Location of Property: 780 Sugarloaf Road
Type of Development: Residential Other
Current Zoning: R-15
Total Acreage: 2.48
Proposed Zoning: PCD CZ
Proposed Building Square Footage: 49,692 SF
Number of Dwelling Units: 0
List of Requested Uses: mini storage warehouse
D. Proposed Development Conditions for the Site
In the spaces provided below, please provide a description of the Proposed Development for the site.