



**CITY OF HENDERSONVILLE
COMMUNITY DEVELOPMENT DEPARTMENT
100 N. King Street, Hendersonville, NC 28792
Phone (828) 697-3010|Fax (828) 698-6185
www.hendersonvillenc.gov**

Petition Requesting to Permanently Close a Street/Alley

The following are the **required** submittals for a complete application to permanently close a street/alley. 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. Completed Application Form
- 2. Appropriate Fee
- 3. A copy of the deed indicating ownership of the property.
- 4. A Survey Plat of the property prepared by a registered surveyor licensed to practice in the state of North Carolina.
- 5. A typed boundary description of the area to be closed, in digital format if possible.

A. Property Information

PIN(s): 9569-41-8704

Name of Alley/Street: UnNamed

Are you proposing to close a street or alley? Street Alley

Are you closing all or a portion of the street/ alley? Portion All

B. Property Owner Contact Information

Susan Frady *Susan D. Frady* 4/16/2024
* Printed Applicant Name Date

Housing Assistance
Printed Company Name (if applicable)

Office Use:
Date Received: _____ By: _____

Corporation Limited Liability Company Trust Partnership

Other: _____

Susan Frady *Susan D. Frady*

Property Owner Signature

Interim Executive Director

Property Owner Title (if applicable)

214 N. King Street

Address of Property Owner

Hendersonville, NC 28792

City, State, and Zip Code

(828) 692-4744

Telephone

susan@housing-assistance.com

Email

C. Additional Property Owner Contact Information (if needed)

* Printed Applicant Name

Date

Printed Company Name (if applicable)

Corporation Limited Liability Company Trust Partnership

Other: _____

Property Owner Signature

Property Owner Title (if applicable)

Address of Property Owner

City, State, and Zip Code

Telephone

Email

D. Additional Property Owner Contact Information (if needed)

* Printed Applicant Name

Date

Printed Company Name (if applicable)

- Corporation Limited Liability Company Trust Partnership
- Other: _____

Property Owner Signature

Property Owner Title (if applicable)

Address of Property Owner

City, State, and Zip Code

Telephone

Email