



**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 **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

Casey Schroader
* Printed Applicant Name

Schroader's Honda
Printed Company Name (if applicable)

☐ Corporation

☒ Limited Liability Company

☐ Trust

☐ Partnership

☐ Other: _____


Applicant Signature

Applicant Title (if applicable)

220 Mitchell Dr
Address of Applicant

Hendersonville NC 28792
City, State, and Zip Code

828-243-8500
Telephone

2HondaGuys@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]

C. Property Information

Name of Project: ~~General~~ Honda Dealership

PIN(s): 9579358920, 9579450833

Address(es) / Location of Property: 220 Mitchell Dr
Hendersonville NC 28792

Type of Development: ☐ Residential ☒ Commercial ☐ Other

Current Zoning: Commercial C-3

Total Acreage: 3.89

Proposed Zoning: CZD

Proposed Building Square Footage: 1ST FLOOR = 26,395 SF; 2ND FLOOR = +/- 6,000 SF

Number of Dwelling Units: N/A

List of Requested Uses: OFFICE / SERVICE / SMALL RETAIL / SHOWROOM

D. Proposed Development Conditions for the Site

In the spaces provided below, please provide a description of the Proposed Development for the site.

THE OWNER WOULD LIKE TO EXPAND THEIR EXISTING BUSINESS AND BUILD A NEW OFFICE / SHOWROOM BUILDING, CONNECTING IT TO THE EXISTING SERVICE CENTER BUILDING. BECAUSE OF THE NATURE OF THE BUSINESS (ATV/MOTORCYCLE/SPORT VEHICLE SALES AND SERVICE), THE PARKING REQUIREMENTS PER ORDINANCE FOR THE NEW SF ARE NOT NEEDED. THE OWNER WOULD LIKE TO HAVE 19 SPACES FOR MOTORCYCLE PARKING AND 25 FOR REGULAR AUTOMOBILES. THERE WILL ALSO BE A TRUCK ACCESS ROAD FOR DELIVERIES THAT LOOP AROUND THE BACK OF THE NEW BUILDING.

B. Property Owner Contact Information (if different from Applicant)

Leonard + Catherine Schroader
*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation

☐ Limited Liability Company

☐ Trust

☐ Partnership

☐ Other: _____

Catherine Schroader
Property Owner Signature

Property Owner Title (if applicable)

Hendersonville NC 28792
City, State, and Zip Code

828-243-8500
Telephone

2HondaGuys@gmail.com
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.

Note: Additional Owner Signature pages attached.

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

*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership

☐ Other: _____

Property Owner Signature

Property Owner Title (if applicable)

City, State, and Zip Code

Telephone

Email

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* 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.

*Printed Owner Name

Printed Company Name (if applicable)

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership

☐ Other: _____

Property Owner Signature

Property Owner Title (if applicable)

City, State, and Zip Code

Telephone

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