



CITY OF HENDERSONVILLE  
COMMUNITY DEVELOPMENT DEPARTMENT  
100 N. King St. ~ Hendersonville, NC ~ 28792  
Phone (828)697-3010 ~ Fax (828) 697-6185  
<https://www.hendersonvillenc.gov/>



# APPLICATION FOR SITE PLAN REVIEW

## Section 7-3 City Zoning Ordinance

The following are required to constitute a complete application for preliminary site plan review:

- ~ This form including the property owner(s) signature(s).
  - ~ Appropriate fee.
  - ~ 2 copies and a digital file of the site plan containing items in Section 7.3-3.2 of the City Zoning Ordinance.
- Projects proposing any of the following must submit a complete application at least 32 days prior to any Planning Board meeting.
- Any commercial, industrial or institutional development consisting of 20,000 or more square feet of floor area.
  - Addition of more than 30 parking spaces.
  - Any minor planned residential development consisting of nine or more dwelling units.

The following are required for final site plan review:

- ~ This form including the property owner(s) signature(s)
- ~ 2 copies of the site plan containing items in Section 7-3-4.3 of the City Zoning Ordinance

Date February 27, 2024

Type of Plan Review



Preliminary



Final

Name of Project New Parking Area for Dignity Funeral Services, Inc.

Location/Address of Property 125 S Church Street

List 10 digit PIN or 7 digit PID number for each property 9568-76-5983

Contact Information Chae T. Davis

Address 125 S. Church St. Hendersonville NC 28792

Phone 828 606 4294

Fax 828 309 0117

Email cdavis@altmeyer.com

CHECK TYPE OF DEVELOPMENT



Residential



Commercial



Other

Current Zoning CMU

Total Acreage 1.12

Proposed Building Sq.ft. 0

# of Dwelling Units 0

Official Use:

DATE RECEIVED: 2/29/24 BY Terri Swann FEE RECEIVED \$ 2/29/24

**Property Owners(s):**

\* ^ Printed Name Dignity Funeral Services Inc., DBA Church St. Funeral Home

☒ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature [Signature]

Title President Email Jimmy@attmeyer.com

Address of Property Owner 5033 Rouse Dr. Virginia Beach VA 23462

\* ^ Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Property Owner \_\_\_\_\_

\* ^ Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Property Owner \_\_\_\_\_

\* ^ Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Property Owner \_\_\_\_\_

\* 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.

**Applicant(s): (Developer)**

Printed Name Dignity Funeral Services, Inc DBA Church St. Funeral Home

☒ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature [Signature]

Title President Email jimmy@altmeyer.com

Address of Applicant 125 S. Church St. Hendersonville NC 28792

Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Printed Name \_\_\_\_\_

☐ Corporation ☐ Limited Liability Company ☐ Trust ☐ Partnership ☐ Other: \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

Address of Applicant \_\_\_\_\_



# BUSINESS CORPORATION ANNUAL REPORT

1/6/2022

NAME OF BUSINESS CORPORATION: Dignity Funeral Services, Inc.

SECRETARY OF STATE ID NUMBER: 1074797

STATE OF FORMATION: WV

REPORT FOR THE FISCAL YEAR END: 12/31/2023

Filing Office Use Only

E - Filed Annual Report  
1074797

CA202406000421  
2/29/2024 09:00

☒ Changes

## SECTION A: REGISTERED AGENT'S INFORMATION

1. NAME OF REGISTERED AGENT: Altmeyer, James E. , Jr.

2. SIGNATURE OF THE NEW REGISTERED AGENT: \_\_\_\_\_

SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

3. REGISTERED AGENT OFFICE STREET ADDRESS & COUNTY 4. REGISTERED AGENT OFFICE MAILING ADDRESS

125 Orr's Camp Road

125 Orr's Camp Road

Hendersonville, NC 28792 Henderson County

Hendersonville, NC 28792

## SECTION B: PRINCIPAL OFFICE INFORMATION

1. DESCRIPTION OF NATURE OF BUSINESS: Funeral Service

2. PRINCIPAL OFFICE PHONE NUMBER: (304) 242-9300

3. PRINCIPAL OFFICE EMAIL: Privacy Redaction

4. PRINCIPAL OFFICE STREET ADDRESS

5. PRINCIPAL OFFICE MAILING ADDRESS

117 Edgington Lane

117 Edgington Lane

Wheeling, WV 26003-1534

Wheeling, WV 26003-1534

6. Select one of the following if applicable. (Optional see instructions)

☐

The company is a veteran-owned small business

☐

The company is a service-disabled veteran-owned small business

## SECTION C: OFFICERS (Enter additional officers in Section E.)

NAME: James E. Altmeyer , Jr.

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: President

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

5033 Rouse Drive

Virginia Beach, VA 23462

SECTION D: CERTIFICATION OF ANNUAL REPORT. Section D must be completed in its entirety by a person/business entity.

James E. Altmeyer Jr.

2/29/2024

SIGNATURE

DATE

Form must be signed by an officer listed under Section C of this form.

James E. Altmeyer Jr.

President

Print or Type Name of Officer

Print or Type Title of Officer

This Annual Report has been filed electronically.

MAIL TO: Secretary of State, Business Registration Division, Post Office Box 29525, Raleigh, NC 27626-0525