



**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. Completed Pre-Application meeting with Planning Staff
- ☒ 2. Scheduled Neighborhood Compatibility Meeting  
NCM Date: \_\_\_\_\_ Time: \_\_\_\_\_
- ☒ 3. Water and Sewer Availability Request
- ☒ 4. Completed Application Form
- ☒ 5. Completed Signature Page (completed Owner's Affidavit if different from applicant)
- ☒ 6. Completed Site Plan as described in Section 7-4.3-1 of the City Zoning Ordinance
- ☒ 7. Detailed explanation of any Proposed Development Description
- ☒ 8. Application Fee
- 9. Transportation Impact Analysis - Required for complete application but not due until 24 calendar days prior to Planning Board Meeting (if required)

**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: \_\_\_\_\_

4/18/2024

By: \_\_\_\_\_

Kary Bragg

Fee Received? Y/N

CX#1594 \$500.00

**A. Applicant Contact Information**

Alyce Marie Knaflich

\* Printed Applicant Name

Aura Home Women Vets

Printed Company Name (if applicable)



Corporation



Limited Liability Company



Trust



Partnership



Other:



Applicant Signature

Founding Director, Board Chair

Applicant Title (if applicable)

1 Dundee St

Address of Applicant

Asheville, NC 28001

City, State, and Zip Code

828-771-6979

Telephone

aurahomewv@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]**

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

Alyce Marie Knafllich

\*Printed Owner Name (Authorized Representative for entities other than individuals)

Aura Home Women Vets

Printed Company Name (if applicable, check corresponding box below)

☒ Corporation      ☐ Limited Liability Company      ☐ Trust      ☐ Partnership

☐ Other: \_\_\_\_\_

  
Property Owner/Authorized Representative Signature

Founding Director, Board Chair

Authorized Representative Title (if applicable - i.e. Member/Manager, President, etc.)

Asheville, NC 28801

City, State, and Zip Code

727-771-6979

Telephone

aurahomewv@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.

**C. Property Information**

Name of Project: Reeves  
Felicia ~~Reese~~ Home

PIN(s): 9569-44-7296

Address(es) / Location of Property: 1744 Meadowbrook Terrace, Hendersonville

Type of Development: ☐ Residential ☒ Commercial ☐ Other

Current Zoning: R-10

Total Acreage: .63

Proposed Zoning: R-10- Special User Permit R-10 CZD - Adaptive Reuse

Proposed Building Square Footage: 7671

Number of Dwelling Units: 1

**List of Requested Uses:**

~~Special Use Permit~~ To be an Adult Care Home

Conditional zoning District  
w/ Residential care facility

**D. Proposed Development Conditions for the Site**

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

Ensuite housing - 12 units

Conditional Zoning District Petition

1744 Meadowbrook Terrace

PIN: 9569-44-7296

AURA HOME WOMEN VETS

7. Proposed Development:

12 ensuite units with shared common areas, kitchen, laundry, classroom, 2 offices – 1 for house director 1 for counselor. 1 of the 12 ensuite units would be for live-in house manager.