

Submit to Planning Department, 200 Dover St, Pineville, NC 28134 Phone (704) 889-2291 Fax (704) 889-2293

Office Use Only:	Application #:
Payment Method: Cash Check Credit Card	Amount \$ Date Paid
Zoning Application	
Note: Application will not be considered until all required submittal components listed have been completed	
Applicant's Name: <u>BLUE HEEL DEVELOPMENT (MATT GALLAGHER)</u>	Phone: <u>704-634-514</u>
Applicant's Mailing Address: 9606 BAILEY ROAD, STE 265 CORNELIUS, NC 28031	
Property Information:	
Property Location: UNASSIGNED DORMAN ROAD	
Property Owner's Mailing Address: 960 HALSEVILLE RD CHESTER SC 29706	
Property Owner Name: MELINDA EARNHEART & GILLIAM HOOPAUGH	
Tax Map and Parcel Number: 22110102 Existing Zoning: R-44	
Which are you applying (Check all that apply):	tional Dozonina V Tout Amandment
Rezoning by Right Conditional Zoning Condi	mondi kezoning Text Amendmeni
Fill out section(s) that apply:	
Rezoning by Right:	
Proposed Rezoning Designation	
Conditional Zoning:	
Proposed Conditional Use <u>SINGLE FAMILY ATTACHED (TOWNHOMES)</u>	
Acreage <u>15.28</u> Square Feet Approximate Height <u>3 STORY</u> # of Rooms	
Parking Spaces Required <u>244</u> Parking Spaces Provided <u>327</u> **Please Attach Site Specific Conditional Plan	
Conditional Rezoning:	
Proposed Conditional Rezoning Designation <u>RMX</u>	
Text Amendment:	
Section Reason	
Proposed Text Change (Attach if needed)	
I do hereby certify that all information which I have provided for this a DocuSigned by:	
Matthew Gallagher Signature of Applicant Melinda Earnheart Hoopangle	7/31/2024
Signature of Applicant	Date
Melinda Earnheart Hoopangh	8/1/2024 17:18 CDT
Signature of Property Owner (If not Applicant)	Date
Signature of Town Official	 Date
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