

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: Nisbet Partners, LLC. and Nisbet Land Partners, LLC Phone: (803) 699-1325

Applicant's Mailing Address: 1556 Main St., Ste 300, Columbia, SC 29201

### Property Information:

Property Location: 12243, 12245, and 12345 Nations Fords Rd., Pineville, NC 28134

Property Owner's Mailing Address: 1556 Main St., Ste 300, Columbia, SC 29201

Property Owner Name: Nisbet Partners, LLC. and Nisbet Land Partners, LLC Phone: 803-699-1325

Tax Map and Parcel Number: 20504123, 20504126, 20504113, 20504112 Existing Zoning: G-I

### Which are you applying (Check all that apply):

Rezoning by Right ☐ Conditional Zoning ☒ Conditional Rezoning ☐ Text Amendment ☐

### Fill out section(s) that apply:

#### Rezoning by Right:

Proposed Rezoning Designation N/A

#### Conditional Zoning:

Proposed Conditional Use Greater than one (1) acre of outdoor storage

Acreage approx. 2.5-3 Square Feet \_\_\_\_\_ Approximate Height 10' or less # of Rooms \_\_\_\_\_

Parking Spaces Required \_\_\_\_\_ Parking Spaces Provided \_\_\_\_\_ **\*\*Please Attach Site Specific Conditional Plan**

#### Conditional Rezoning:

Proposed Conditional Rezoning Designation N/A

#### Text Amendment:

Section N/A Reason \_\_\_\_\_

Proposed Text Change (Attach if needed) \_\_\_\_\_

I do hereby certify that all information which I have provided for this application is, to the best of my knowledge, correct.

  
Signature of Applicant

8/8/25  
Date

\_\_\_\_\_  
Signature of Property Owner (If not Applicant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Town Official

\_\_\_\_\_  
Date