

Town of Swansboro
601 W. Corbett Avenue Swansboro, NC 28584
Phone (910) 326-4428 - Fax (910) 326-3101

APPLICATION FOR ZONING & ORDINANCE AMENDMENTS

Check the Appropriate Blank

- Add a Use to a Zoning District
- Remove a Use from a Zoning District
- Create a New Zoning District
- Future Land Use Map Amendment

- Application No. _____
- Amend Code of Ordinances
 - Amend Unified Development Ordinance
 - Zoning District Designation Change

A complete application must be received with the fee by the third Friday prior to the month of review.

Property Owner Name Flybridge Swansboro, LLC Phone # 910-791-6707 (rep)

Address of Zoning Request 1481 W Corbett Ave, Swansboro, NC 28584

Mailing Address PO Box 130, Sanford, NC 27331

Zoning Amendments

Attach a copy of the legal description of the property (including address if assigned) that is requested for a zoning change (i.e. metes and bounds). The application will not be scheduled for review until these items are received.

Provide a list names and mailing address of adjacent property owner on the reverse side of this application. The application will not be scheduled for review until these items are received.

Present Zoning RA (Residential / Agriculture) Desired Zoning Conditional B-1

Probable Use of Property Multi-Family Residential & Commercial

Reason for Zoning Change Request *See attached narrative

Ordinance Amendments

Code Section to be amended _____

Print clearly the code section wordage to be amended _____

Print clearly the code section wordage as suggested _____

Reason for requested amendment _____

Signature Cory Date 10/30/24

Future Land Use Map Amendment

Present Future Land Use Category RA Desired Future Land Use Category Suburban Town Center

Use of Property Proposed Multi-Family Residential & Commercial

Reason for Future Land Use Map Change Request *See attached narrative

Town Hall Use Only

Fee Paid \$800 Date Received 11/8/24 Date scheduled for Planning & Zoning Board review 11/7/25

Recommendation from Planning & Zoning Board _____

Public Hearing Run Dates _____ Date of Public Hearing _____

Effective Date of Change _____ Ordinance Number _____