



**City of Trinity
Rezoning Request Application**

The undersigned does hereby respectfully make an application and request that the City of Trinity amend the Official Zoning Map as hereinafter requested, and in support of this application the following facts are shown:

Zoning: Current Zoning RR Requested Zoning OI
Conditional:

Property Owner Information

Property Owner: New Day Fellowship of Trinity

Address: PO Box 971
City: Trinity State: NC Zip: 27370
Phone: (336) 803-5744

Site Information

PIN # 7707-67-7179
Property Address: 5521 Meadowbrook Dr Trinity NC 27370
Deed Book: 002637 Page: 00018
Area: 0.46 acres

Parcel Map: _____ Site Plan: _____

Applicant Information

Applicant: New Day Fellowship of Trinity
Address: PO Box 971
City: Trinity State: NC Zip: 27370
Phone: (336) 803-5744

Statement of Conditions:

Request to convert zoning from RR to OI. Properties best use is for office and institutional purposes. Current configuration is a church. Applicant intends to convert church to office space for professional services. _____

Note: Information and Fee Required from Applicant and Processing of Information is \$600 (Six Hundred Dollars): Applicants must present the following information as required by Article 4.3 of the Land Management Ordinance:

1. A completed City of Trinity rezoning application, signed by the property owner, to include required fees;
2. An accurate survey of the property(ies) to be rezoned ;
3. A deed(s) or legal description which establishes ownership of all properties proposed for rezoning;
4. If the proposed zoning boundary splits an existing parcel a metes and bounds description shall be required in addition to the survey, and;
5. Submittals for rezoning requests expected to generate 100 trips during peak hours or 1,000 average daily trips shall include a Traffic Impact Analysis prepared by a licensed traffic engineer; and,
6. A rezoning fee established by the City Council shall be required. Processing of zoning amendment applications shall begin within ninety (90) days from submission to the City Clerk. However, this requirement is not intended to prevent the Planning Board or City Council from delaying action after review by either body. If more than one tract or parcel is being sought for rezoning at the same time by a single applicant, each parcel having a different zone shall constitute a separate rezoning request.

John C ANDERS
Name of Applicant*

[Signature]
Signature of Applicant

7/13/05
Date

John C ANDERS
Name of Property Owner

[Signature]
Signature of Property Owner/Authorized Agent

8/13/05
Date

Office Use

Date Received: _____

Application #: _____

Staff Review: _____ Comments

Planning Board Review: _____

City Council Review: _____

Rezoning Request: #

Randolph County, NC

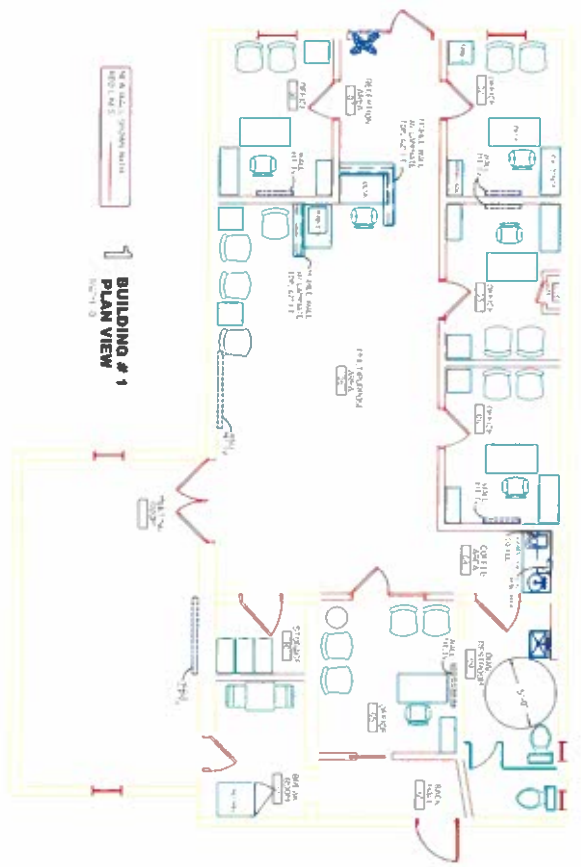


REID	20293	OWNER ADDRESS2	
PIN	7707677179	OWNER CITY	TRINITY
TAXED ACREAGE	0.46	OWNER STATE	NC
PROPERTY DESCRIPTION	R1564;W	OWNER ZIP	27370
DEED BOOK & PAGE	002637/00018	LOCATION ADDRESS	5521 MEADOWBROOK DR
PLAT BOOK & PAGE		LOCATION ZIP	TRINITY,27370
OWNER	NEW DAY FELLOWSHIP OF TRINITY	DATA REFRESHED	7/6/2025
OWNER ADDRESS	PO BOX 971		

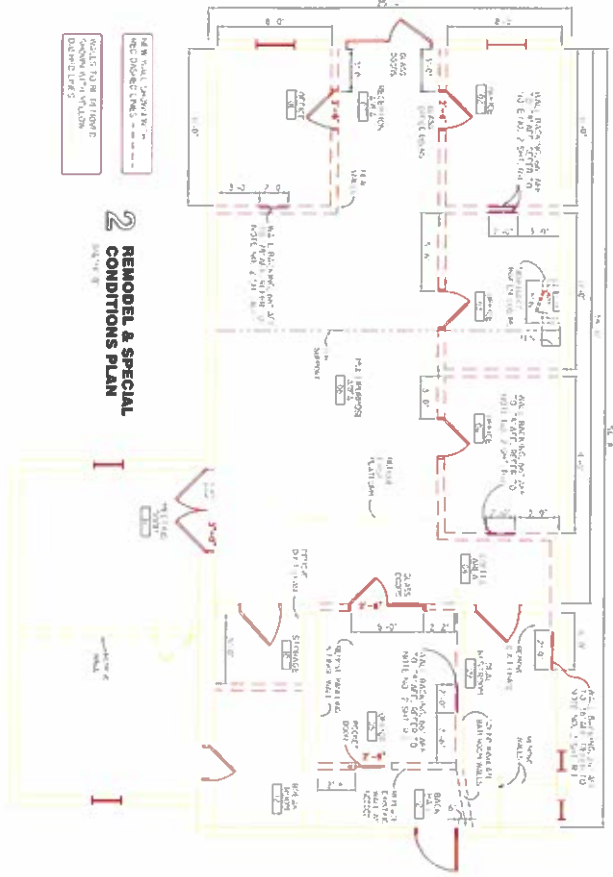


Disclaimer: This map was compiled from recorded deeds, plats, and other public records and data. Users of this data are hereby notified that the aforementioned public information sources should be consulted for verification of the information. Randolph County, its agents and employees make no warranty as to the accuracy of the information on this map.

Map Scale
 1 inch = 47 feet
 7/12/2025



BUILDING # 1
PLAN VIEW



REMODEL & SPECIAL
CONDITIONS PLAN

SPECIAL CONDITIONS NOTES

1. ALL CONTRACTORS MUST COORDINATE AND VERIFY ALL INFORMATION WITH THE ARCHITECT.
2. CONTRACTORS MUST FOLLOW ALL LOCAL, STATE AND FEDERAL REGULATIONS AND ALL APPLICABLE PERMITS AND ORDINANCES.
3. CONTRACTORS TO VERIFY ALL EXISTING CONDITIONS AND ALL UTILITIES BEFORE BEGINNING WORK.
4. CONTRACTORS TO VERIFY ALL EXISTING CONDITIONS AND ALL UTILITIES BEFORE BEGINNING WORK.
5. CONTRACTORS TO VERIFY ALL EXISTING CONDITIONS AND ALL UTILITIES BEFORE BEGINNING WORK.



211 Swathmore Avenue, High Point, NC 27263

To Whom It May Concern:

To the best of my knowledge, the impervious surface at 5521 Meadowbrook Drive Trinity NC has remained the same since before 1994. If you have any questions, please feel free to contact me at any time.

Thank You,

A handwritten signature in black ink, appearing to read "John Anders". The signature is fluid and cursive, with the first name "John" being more prominent than the last name "Anders".

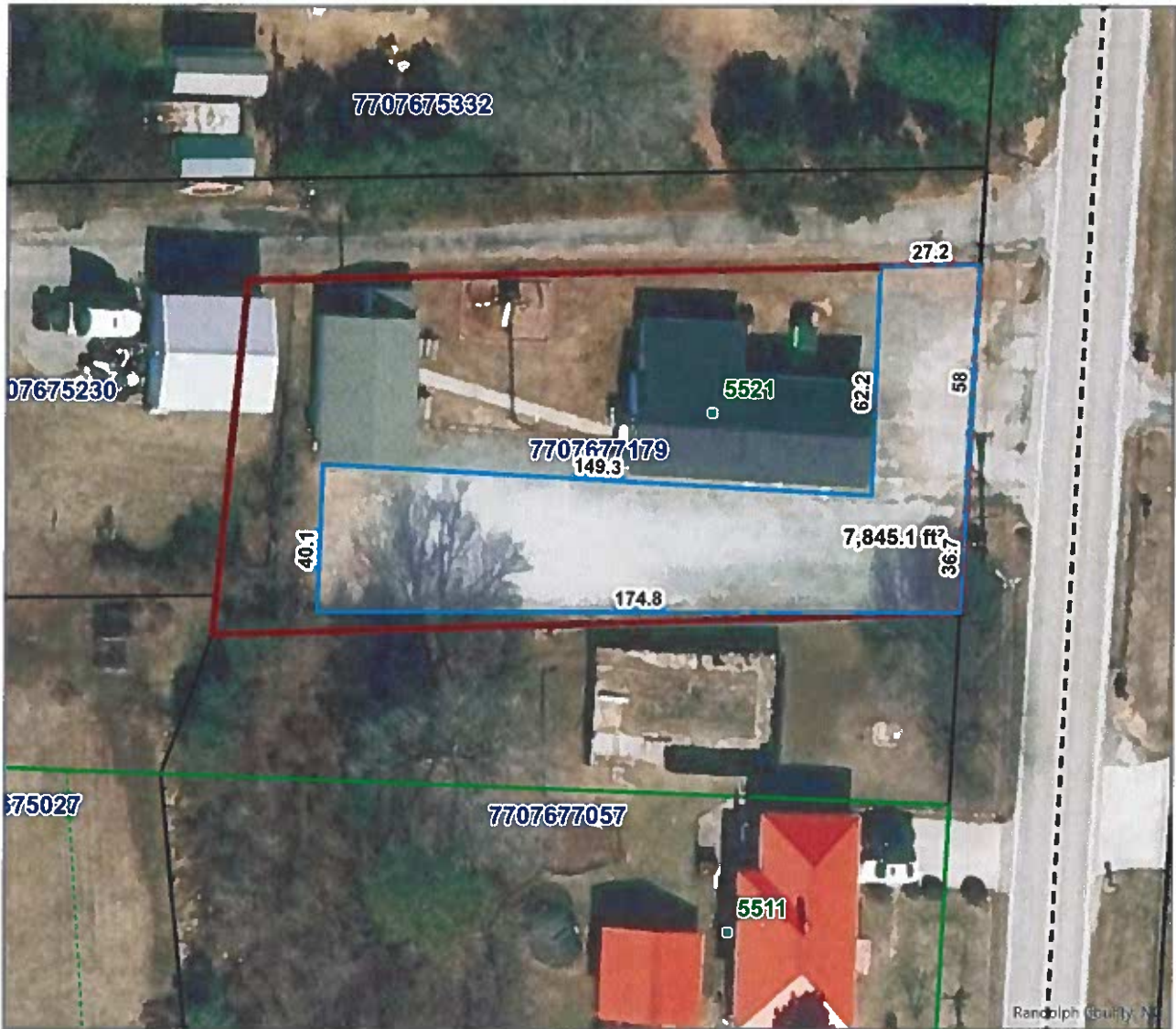
John Anders

Pastor – New Day Fellowship

(336)847-6636

newdayfellowshipoftrinity@gmail.com

Randolph County, NC



REID	20293	OWNER ADDRESS2	
PIN	7707677179	OWNER CITY	TRINITY
TAXED ACREAGE	0.46	OWNER STATE	NC
PROPERTY DESCRIPTION	R1564;W	OWNER ZIP	27370
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PLAT BOOK & PAGE		LOCATION ZIP	TRINITY,27370
OWNER	NEW DAY FELLOWSHIP OF TRINITY	DATA REFRESHED	7/27/2025
OWNER ADDRESS	PO BOX 971		



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8/3/2025