

Permit Number: _____



PETITION FOR ZONING CHANGE OF PROPERTY AND/OR TEXT AMENDMENT

(Please read petition thoroughly before completing. Incomplete or illegible applications will not be accepted.)

* * * * *

The petitioner requests that the County of Stanly Zoning Map be amended as indicated below.

IMPORTANT: Supplementary information required as part of petition to be included:

- Copy of recorded deed
- Copy of the Stanly County Tax Map which delineates the property requested for rezoning
- Legal description of property requested for rezoning, by metes and bounds or a recorded plat depicting such
- Text changes submitted on 8 1/2 X 11 with shaded text representing new language and strikethroughs for language to be removed.

Additional information may be provided and attached to this petition.

Applications must be submitted and reviewed by the Planning Department, 1000 N. First Street, Suite 13B., Albemarle, NC 28001 for completeness prior to acceptance. Fees payable to the County of Stanly must accompany the petition.

This petition will be scheduled for the next possible regular Planning and Zoning Board meeting. The petitioner or his representative should be present at the meeting to answer any questions. Planning and Zoning Board meetings are held on the second (2nd) Monday of each month at 7:00 P.M. in the Commissioners Chambers located at the Stanly County Commons Building, 1000 N. First Street, Albemarle, NC 28001. Petitioners will be informed of any changes in date, time, or location of meetings. Petitions and supplementary information must be received at least 11 working days prior to the scheduled meeting date to allow time for processing and advertisement as required by the General Statutes of North Carolina.

PLEASE PRINT

Name of Petitioner: _____ (Phone Number)

Owner Name and Address: _____ (Print Name) (Address)

(City, State, Zip) (Email Address)

Address(s) of Requested Site: _____

Tax Parcel #(s) _____

Acreage/Sq. Ft _____ Existing Zone _____ Requested Zone _____

Signature of Petitioner: _____ Date _____

Signature of Owner _____ Date _____
(if owner is not petitioner)

Permit Number: _____

* * * * * FOR USE BY COUNTY STAFF ONLY * * * * *

ADVERTISEMENT

Date(s) _____

PLANNING AND ZONING BOARD

Date _____

Approved Denied

Comments: _____

COMMISSIONERS MEETING

Date _____

Approved Denied

Comments: _____

* * * * *

Received & Reviewed by:

Title: _____

Date: _____

ADDITIONAL INFORMATION:

