OFFICIAL REZONING APPLICATION CITY OF CHARLOTTE

FY2008 Petition #:	2008-067
Date Filed:	2 2 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Received By	1

Complete All Fields

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OWNERSHIP INFORMATION:		
Property Owner: Sharon Arms Apartments LLC		
Owner's Address: Post Office Box 36509	City, State, Zip: <u>Ch</u> a	arlotte, NC 28236
Date Property Acquired: 1998 Utilities Provided: (Water) <u>CMUD</u> CMUD, Private, Other)	(Sewer) CMUD (CMUD, Private, Other)
LOCATION OF PROPERTY (Address or Description): 431	3, 4317 and 4325	Colwick Road
Tax Parcel Number(s): <u>15717222</u>		
Current Land Use: Multifamily		
Size (Sq.Ft. or Acres): 72,800 square feet		
ZONING REQUEST:	•	
Existing Zoning: O-2	Proposed Zoning: MUI	DD - CD
Purpose of Zoning Change: (Include the maximum # of residential ur	nits or non-residential square fo	otages):
To accommodate redevelopment of the pr	operty.	
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Susan Cannon	Golwick Medical	Partners IIC
Walter Fields Name of Agent	Name of Petitioner(s	
Kimley-Horn & Associates	1850 East Thir	•
4651 Charlotte Park Drive, Suite 300	Suite 200	
Agent's Address	Address of Petitioner(s)
Charlotte, NC 28217	Charlotte, NC	28204
City, State, Zip	City, State, Zip	
704.333.5131 704.333.0845	704.377.7655	704.377.7656
Telephone Number Fax Number	Telephone Number	Fax Number
susan.cannon@kimley-horn.com	•	•
walter.fields@kimley-horn.com	athomas@thomas	buildingcompany.com
E-Mail Address	E-Mail Address	
See Attached Joinder	At A	12
Signature of Property Owner if other than Petitioner	Signature	
(Name Typed / Printed)	Albert A. Thomas (Name Typed / Printer	
(tvame 1 yped / rimted)	(Name Typed / Printe	u)