OFFICIAL REZONING APPLICATION **CITY OF CHARLOTTE**

r 12009 Petition No.	2009-19	
Date Filed:_	11/24/08	_
Received By:	1/1/	
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OWNERSHIP INFORMATION:				
Property Owner: Charlotte Mecklenburg Hospital Au	11-24-08P04:27 RCVD Ly			
Owner's Address: P. O. Box 32861, Charlotte, North C				
Date Property Acquired: 2005	219-122-02; 219-122-03; 219-122-01; 219-121-05; 219-121-06; 219-121-07; 219-121-08 and Tax Parcel Number(s): 219-121-09			
Utilities Provided; (Water) CMUD	(Sewer) CMUD			
(CMUD, Private, Other) (CMUD, Private, Other) LOCATION OF PROPERTY (Address or Description):				
Southwesterly corner of the intersection of Highway 49 and Highway 160 (Steele Creek Road)				
Size (Sq. Ft. or Acres): Approximately 16.3 acres				
Current Land Use: The previously approved medical office facility is currently under construction.				
ZONING REQUEST:				
Existing Zoning: O-2(CD)	Proposed Zoning: O-2(CD) Site Plan Amendment			
Purpose of Site Plan Amendment: The site is currently zoned for a medical office facility including an emergency center. The purpose of this site plan amendment request is to accommodate a helipad on the medical campus in order to support emergency transportation needs of patients of the emergency center.				
Laura Simmons	Carolinas Health Care System			
Name of Agent	c/o Jeffrey Booker			
K & L Gates	Names of Petitioners			
Hearst Tower, 214 North Tryon Street, 47th Floor	Carolinas Health Care System P.O. Box 32861			
Charlotte, NC 28202	Charlotte, NC 28232			
Agent's Address (City, State, Zip)	Address of Petitioners (City, State, Zip)			
704-331-5784 704-353-3684	704-512-7585			

704-512-7585

E-Mail Address

Telephone Number

jeff.booker@carolinashealthcare.org

Fax Number

Fax Number

Signature of Property Owner if other than Petitioner

Telephone Number

E-Mail Address

Laura.simmons@klgates.com