*FY2012*

Petition #: 2012-036

Date Filed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Received By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Use Only

**ZONING ORDINANCE**

**TEXT AMENDMENT APPLICATION**

**CITY OF CHARLOTTE**

**Revised 5-30-12** Revised 12-22-12

**Section #: 9.101 Table of Uses**

 **9.802 Uses permitted by right (Business Districts)**

 **9.903 Uptown Mixed Use District; uses permitted with prescribed conditions**

 **9.1002 Urban Industrial District; uses permitted by right**

 **9.1102 Uses permitted by right (Industrial Districts)**

 **9.1205 Uses permitted by right (Transit Oriented Development Districts)**

 **12.545 Tattoo establishment (new)**

**Purpose of Change:**

**In 2009, the Zoning Administrator made an interpretation that tattoo establishments are considered to be a “personal service” use currently allowed by right in the UR-C, B-1, B-2, BP, TOD, I-1, and I-2 zoning districts.**

**The purpose of this amendment is to 1) add tattoo establishments as a permitted use by right in BD and U-I zoning districts, 2) add tattoo establishments as a use allowed with prescribed conditions in the UMUD zoning district, and 3) clarify that tattoo establishments are allowed as a use by right in the UR-C, B-1, B-2, BP, TOD, I-1 and I-2 zoning districts.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Michael C. Drossos

**Name of Agent Name of Petitioner(s)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2307 Coatsdale Lane

Agent's Address Address of Petitioner(s)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Matthews, North Carolina 28104

City, State, Zip City, State, Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 704-957-8168

Telephone Number Fax Number Telephone Number Fax Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ tat2greek@hotmail.com

E-Mail Address E-Mail Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Signature of Agent Signature