

I. REZONING APPLICATION
CITY OF CHARLOTTE

RECEIVED	
Petition #:	
Date Filed:	MAY 16 2017
Received By:	<i>[Signature]</i>

Complete All Fields (Use additional pages if needed)

Property Owner: CAROWINDS, LLC

Owner's Address: PO BOX 543185 City, State, Zip: DALLAS, TX 75354

Date Property Acquired: 12/30/2014

Property Address: 14523 Carowinds Blvd Charlotte, NC 28273

Tax Parcel Number(s): 20317102

Current Land Use: VACANT Size (Acres): 24.16 Acres

Existing Zoning: 1-2 Proposed Zoning: 1-1

Overlay: NONE (Specify PED, Watershed, Historic District, etc.)

Required Rezoning Pre-application Meeting* with: CLARK WTS - ORA/HGM, ALBOND 0012602

Date of meeting: 4/25/17

(*Rezoning applications will not be processed until a required pre-application meeting with a rezoning team member is held.)

For Conditional Rezonings Only:

Requesting a vesting period exceeding the 2 year minimum? Yes/No. Number of years (maximum of 5): _____

Purpose/description of Conditional Zoning Plan: _____

JAMES HADEN
Name of Rezoning Agent

101 N. TRYON ST. SUITE 1400
Agent's Address

CHARLOTTE, NC 28202
City, State, Zip

704.909.3502
Telephone Number

inoden@stewartinc.com
E-Mail Address

[Signature]
Signature of Property Owner

Patricia Jones
(Name Typed / Printed)

Carowinds
Name of Petitioner(s)

14523 Carowinds Blvd
Address of Petitioner(s)

Charlotte, NC 28273
City, State, Zip

704.587.9027 704.913.2881
Telephone Number Fax Number

Steve.Jackson@Carowinds.com
E-Mail Address

[Signature]
Signature of Petitioner

Patricia Jones
(Name Typed / Printed)