## I. REZONING APPLICATION CITY OF CHARLOTTE

AUG 19 2016

	2016-(56
Petition #:	
Date Filed:	8/19/2016
Received By: _	Ri-
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Complete All Fields	(Use additional	nages if needed)
complete All Fields	USE auditional	pages ii needed)

Property Owner: GATEWAY COMMUNITI	ES NC, UC
Owner's Address: 6701 CARMER RO#67	Ol City, State, Zip: Charlotte NC 28226
Date Property Acquired: 2/21/14	
Property Address: NA (property is a reman	t with no frontage)
Tax Parcel Number(s): 08 303 145	
Current Land Use: VACANT	Size (Acres): 4- 0.68
Existing Zoning: 1 - 2	Proposed Zoning: TOD - P(CD)
Overlay:	(Specify PED, Watershed, Historic District, etc.)
Required Rezoning Pre-Application Meeting* with: Sonja	Sanders, Amanda Vari, Monka Holmes, Konyter
(*Rezoning applications will not be processed until a require held.)	
Requesting a vesting period exceeding the 2 year minimum Purpose/description of Conditional Zoning Plan:	
Name of Rezoning Agent  Bly Central Age # e6  Agent's Address  Charlete, NC 28205  City, State, Zip  704 334.3303 x/07 704 334 3305  Telephone Number Fax Number  Chip & Urbandesign partners. Com  E-Mail Address  Name Typed / Printed)	Name of Petitioner(s)  Address of Petitioner(s)  Charlet NC 78224  City, State, Zip  Telephone Number  Dave Cleare Complete Compl