

**I. REZONING APPLICATION
CITY OF CHARLOTTE**

RECEIVED
DEC 19 2016
BY: _____

Petition #: _____
Date Filed: 12/19/2016
Received By: RK

Complete All Fields (Use additional pages if needed)

Property Owner: YOUNG E. GARRISON

Owner's Address: 7024 MONTGOMERY ROAD City, State, Zip: CLOVER SC 29710

Date Property Acquired: 10/15/1992

Property Address: MALLARD CREEK ROAD

Tax Parcel Number(s): 029-201-07

Current Land Use: VACANT Size (Acres): 29.01 AC

Existing Zoning: CC 2000-732 Proposed Zoning: CC-SPA

Overlay: _____ (Specify PED, Watershed, Historic District, etc.)

Required Rezoning Pre-Application Meeting* with: SOLOMON FORTUNE
Date of meeting: 11/23/16

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

For Conditional Rezoning Only:

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

Purpose/description of Conditional Zoning Plan: To Allow 322 MULTI-FAMILY UNITS AS A SINGLE USE ON SUBJECT PROPERTY

DESIGN RESOURCE GROUP
Name of Rezoning Agent

2459 WILKINSON BLVD SUITE 200
Agent's Address

CHARLOTTE NC 28208
City, State, Zip

704 343 0608 704
Telephone Number Fax Number

jia@drgrp.com
E-Mail Address

Young E Garrison, Trustee
Signature of Property Owner

YOUNG E. GARRISON
(Name Typed / Printed)

Spectrum Properties
Name of Petitioner(s)

201 S. Tryon Street Ste #550
Address of Petitioner(s)

Charlotte NC, 28202
City, State, Zip

704-358-1000 / 704-358-9099
Telephone Number Fax Number

iwagoner@spectrum-properties.com
E-Mail Address

[Signature]
Signature of Petitioner

Ian Wagoner
(Name Typed / Printed)