



**GUILFORD COUNTY
PLANNING AND DEVELOPMENT**

**Planning Board
Conditional Zoning Application**

Date Submitted: 8-12-16 Fee/Receipt # \$500.00 / ☒ Case Number 16-08-Gepl-04265

Provide the required information as indicated below. Pursuant to the Guilford County Development Ordinance, this application will not be processed until application fees are paid; the form below is completed and signed; and all required maps, plans and documents have been submitted to the satisfaction of the Enforcement Officer. Additional sheets for tax references and signature blocks are available upon request.

Pursuant to Section 3-12 of the Guilford County Development Ordinance, the undersigned hereby requests Guilford County to rezone the property described below from the AG zoning district to the C2 RS-30 Conditional zoning district. Said property is located at 535 599 Plainfield Road and 601 617 Plainfield Road in Center Grove Township; Being a total of: 21.46 acres.

Further referenced by the Guilford County Tax Department as:

Tax Parcel # <u>0137976</u> <u>15.8 AC</u>	Tax Parcel # _____
Tax Parcel # <u>0137978</u> <u>5.66 AC</u>	Tax Parcel # _____
Tax Parcel # _____	Tax Parcel # _____

Check One:

- ☒ The property requested for rezoning is an entire parcel or parcels as shown on the Guilford County Tax Map.
- ☐ The property requested for rezoning is a portion of a parcel or parcels as shown on the Guilford County Tax Map; a written legal description of the property and a map are attached.

Check One:

- ☒ Public services (i.e. water and sewer) are not requested or required.
- ☐ Public services (i.e. water and sewer) are requested or required; the approval letter is attached.

Check One:

- ☐ The applicant is the property owner(s)
- ☐ The applicant is an agent representing the property owner(s); the letter of property owner permission is attached.
- ☒ The applicant has an option to purchase or lease the property; a copy of the offer to purchase or lease is attached (financial figures may be deleted).
- ☐ The applicant has no connection to the property owner and is requesting a third party rezoning.

Conditional Zoning Requirements:

- ☒ Zoning Sketch Plan. A sketch plan illustrating proposed conditions and other pertinent information is required for all conditional rezoning requests. Sketch elements not illustrating proposed conditions are subject to subdivision and site plan review. Refer to Appendix 2, Map Standards of the Guilford County Development Ordinance.
- ☒ Zoning Conditions. Use and/or development conditions must be provided. Complete Page 2 of this application. Refer to uses as listed in Table 4-3-1 of the Guilford County Development Ordinance.



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Use Conditions

Uses of the property shall be limited to the following uses as listed in Article IV, Table 4-3-1 of the Guilford County Development Ordinance:

- 1) _____

- 2) _____

- 3) _____

- 4) _____

Development Conditions

Development of the property shall occur in accordance with the following standards and requirements in addition to those specified in the Guilford County Development Ordinance:

- 1) A maximum of twenty one (21) lots shall be permitted.

- 2) _____

- 3) _____

- 4) _____

A Conditional Zoning Application must be signed by current property owner(s).

I hereby agree to conform to all applicable laws of Guilford County and the State of North Carolina and certify that the information provided is complete and accurate to the best of my knowledge. I acknowledge that by filing this application, representatives from Guilford County Planning and Development may enter the subject property for the purpose of investigation and analysis of this request.

YOU OR SOMEONE REPRESENTING YOU MUST BE PRESENT AT THE PUBLIC HEARING

Respectfully Submitted,

* Anne H. Cloyd

Property Owner Signature

Anne H. Cloyd

Name

806 Nash Street

Mailing Address

Wilson, NC 27893

City, State and Zip Code

Phone Number

Marc Isaacson

Representative Signature (if applicable)

Marc Isaacson

Name

804 Green Valley Road, Suite 200

Mailing Address

Greensboro, NC 27408

City, State and Zip Code

336-275-7626

Phone Number



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Additional Tax Map References

Further referenced by the Guilford County Tax Department as:

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

Tax Parcel # _____

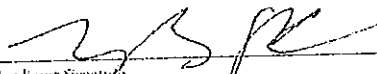
Tax Parcel # _____

Tax Parcel # _____

Additional Signatures

I hereby agree to conform to all applicable laws of Guilford County and the State of North Carolina and certify that the information provided is complete and accurate to the best of my knowledge. I acknowledge that by filing this application, representatives from Guilford County Planning and Development may enter the subject property for the purpose of investigation and analysis of this request.

YOU OR SOMEONE REPRESENTING YOU MUST BE PRESENT AT THE PUBLIC HEARING


Applicant Signature

Bill Yearn, *Yearn Properties, Inc.*

None

Mailing Address

City, State and Zip Code

Phone Number

Applicant Signature

Name

Mailing Address

City, State and Zip Code

Phone Number

Applicant Signature

Name

Mailing Address

City, State and Zip Code

Phone Number

Applicant Signature

Name

Mailing Address

City, State and Zip Code

Phone Number