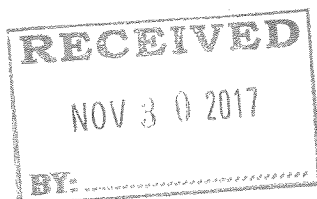


**I. REZONING APPLICATION
CITY OF CHARLOTTE**



2017-193

Petition #: _____
Date Filed: 11/30/2017
Received By: [Signature]

Complete All Fields (Use additional pages if needed)

Property Owner: MAZEN CHAKRA
Owner's Address: 3700 BODENHAM CT. City, State, Zip: Charlotte, NC 28215
Date Property Acquired: June, 9 2017
Property Address: 13000 PLAZA RD EXT CHARLOTTE NC 28215
Tax Parcel Number(s): 10520105
Current Land Use: N/A Size (Acres): 4.61
Existing Zoning: R-3 Proposed Zoning: R-8 MF
Overlay: _____ (Specify PED, Watershed, Historic District, etc.)
Required Rezoning Pre-Application Meeting* with: Sonja Sanders
Date of meeting: 11-28-17

(*Rezoning applications will not be processed until a required pre-application meeting with a rezoning team 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: _____

MAZEN CHAKRA
Name of Rezoning Agent
3700 Bodenham ct
Agent's Address
Charlotte, NC 28215
City, State, Zip
980-233-1397
Telephone Number Fax Number
Sarychakra@yahoo.com
E-Mail Address
[Signature]
Signature of Property Owner
MAZEN CHAKRA
(Name Typed / Printed)

MAZEN CHAKRA
Name of Petitioner(s)
3700 Bodenham ct
Address of Petitioner(s)
Charlotte, NC 28215
City, State, Zip
980-233-1397
Telephone Number Fax Number
Sarychakra@yahoo.com
E-Mail Address
[Signature]
Signature of Petitioner
MAZEN CHAKRA
(Name Typed / Printed)