

2018-040

**I. REZONING APPLICATION
CITY OF CHARLOTTE**

Petition #: _____
Date Filed: MAR 16 2018
Received By: JK
BY: JK

Complete All Fields (Use additional pages if needed)

Property Owner: ITG, LLC
Owner's Address: P.O. Box 32612 City, State, Zip: Charlotte, NC 28232
Date Property Acquired: 4/9/2015
Property Address: 4427 Monroe Rd Charlotte, NC 28205
Tax Parcel Number(s): 15906122
Current Land Use: Vacant Size (Acres): 0.38
Existing Zoning: R-17 MF Proposed Zoning: B-1
Overlay: _____ (Specify PED, Watershed, Historic District, etc.)
Required Rezoning Pre-Application Meeting* with: Sonja Sanders
Date of meeting: 2/15/18

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

Name of Rezoning Agent

Agent's Address

City, State, Zip

Telephone Number Fax Number

E-Mail Address

Signature of Property Owner
Charlie Casselman ORC ITG, LLC
(Name Typed / Printed)

Charlie Casselman
Name of Petitioner(s)
P.O. Box 32612
Address of Petitioner(s)
Charlotte, NC 28232
City, State, Zip
704 770 5105
Telephone Number Fax Number
Cromwell Construction QC@gmail.com
E-Mail Address

Signature of Petitioner
Charlie Casselman
(Name Typed / Printed)