

**I. REZONING APPLICATION
CITY OF CHARLOTTE**

RECEIVED
AUG 29 2018
BY:

2018-115
Petition #: _____
Date Filed: 8/29/2018
Received By: P
HF

Complete All Fields (Use additional pages if needed)

Property Owner: Naomi Lee
Owner's Address: PO Box 3144 City, State, Zip: Huntersville NC 28070
Date Property Acquired: _____
Property Address: 7400 Beatties Ford Rd
Tax Parcel Number(s): 02518111
Current Land Use: Vacant Land Size (Acres): 9.68 + 10.4 = 20.08
Existing Zoning: R-3 Proposed Zoning: R-4
Overlay: _____ (Specify PED, Watershed, Historic District, etc.)
Required Rezoning Pre-Application Meeting* with: Claire
Date of meeting: Aug. 28, 2018

(*Rezoning applications will not be processed until a required pre-application meeting with a rezoning team member 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 _____
Naomi M. Lee
Signature of Property Owner _____
Naomi Lee
(Name Typed / Printed)

JDSI, LLC
Name of Petitioner(s) _____
3515 Dovewood Dr
Address of Petitioner(s) _____
Charlotte NC 28226
City, State, Zip _____
704-361-7777
Telephone Number _____ Fax Number _____
judsonstringfellow@gmail.com
E-Mail Address _____
Judson Stringfellow
Signature of Petitioner _____
Judson Stringfellow
(Name Typed / Printed)

**I. REZONING APPLICATION
CITY OF CHARLOTTE**

Petition #:	_____
Date Filed:	_____
Received By:	_____

Complete All Fields (Use additional pages if needed)

Property Owner: Nancy Annette Donaldson ✓ Arthur J. Donaldson 

Owner's Address: 12 Ballybunion Way City, State, Zip: Bluffton, SC 29910

Date Property Acquired: _____

Property Address: 7420 Beatties Ford Rd - 4100 McClure Rd

Tax Parcel Number(s): 02518110

Current Land Use: Vacant Land Size (Acres): 10.4

Existing Zoning: R-3 Proposed Zoning: R-4

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

Required Rezoning Pre-Application Meeting* with: _____

Date of meeting: _____

(*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: _____


Name of Rezoning Agent

Agent's Address

City, State, Zip

Telephone Number Fax Number

E-Mail Address


Signature of Property Owner

Nancy Annette Donaldson

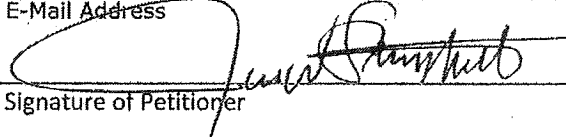
JDSI, LLC
Name of Petitioner(s)

3515 Dovewood Dr
Address of Petitioner(s)

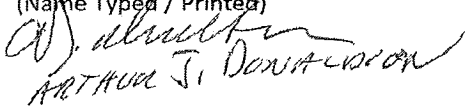
Charlotte NC 28226
City, State, Zip

704-361-7777
Telephone Number Fax Number

judsonstringfellow@gmail.com
E-Mail Address


Signature of Petitioner

Judson Stringfellow

(Name Typed / Printed)

ARTHUR J. DONALDSON

(Name Typed / Printed)