## OFFICIAL REZONING APPLICATION CITY OF CHARLOTTE

Complete All Fields

FY2012 Petition #:	0012-053
Date Filed:	3.22.12
Received By:	My

OWNERSHIP INFORMATION:			
Property Owner: Novant Health, Inc			
Owner's Address: 2085 Frontis Plaza Blvd C	City, Winston Salem State, N	C Zip: 27103	
Date Property Acquired: 1988 Utilities Provided:	(Water) (S (CMUD, Private, Other) (C	iewer) MUD. Private, Other)	
LOCATION OF PROPERTY (Address or Description): 180	00 E 4 <sup>th</sup> St		
Tax Parcel Number(s): 15501314			
Current Land Use: Medical Office			
Size (Sq.Ft. or Acres): 39639 Square Foot			
ZONING REQUEST:			
xisting Zoning: MUDD-O (SPA)			
Sherri Hartsell			
Name of Agent	Name of Petitioner(s)		
414 Russell St Agent's Address	200 Hawthorne Lane Address of Petitioner(s)		
Kannapolis, NC 28083 City, State, Zip	Charlotte, NC 28204 City, State, Zip		
704-791-9789 704-932-7109 Telephone Number Fax Number	704-384-4089 Telephone Number	704-316-9880 Fax Number	
merri@advantage-permits.com aigreear@novant Mail Address E-Mail Address		Juar	
Signature of Property Owner if other than Petitioner	Signature ()  Joy K. Gre	() elur	
(Name Typed / Printed)	(Name Typed / Printed)		