

Hearing Request Application - Form 1

Zoning Board of Adjustment

City of Charlotte

Date Filed: 12/24/08 Case Number: 09-003 Received by: _____

Instructions

This form must be filed out completely. Please attach the appropriate additional form depending on your request type along with required information as outlined in the appropriate checklist. Please type or print legibly. All property owners must sign and consent to this application, attach additional sheets if necessary. If the applicant is not the owner, the owners must sign the Designation of Agent section at the bottom of this form.

The Applicant Hereby (check all that apply):

- ☐ Requests a variance from the provisions of the zoning ordinance as stated on Form 2
- ☐ Appeals the determination of a zoning official as stated on Form 3
- ☐ Requests an administrative deviation as stated on Form 4

Applicant or Agent's Name: Mitchell M. Henkert

Mailing Address: 4037 E. Ind Blvd Suite 545

City, State, Zip: Charlotte N.C 28205

Daytime Telephone: 704-569-1732 Home Telephone: 704-533-3302

Interest in this Case (please circle one): Owner Adjacent Owner (Other)

Property Owner(s) [if other than applicant/agent]: Charles W. Walken

Mailing Address: 3401 Commonwealth Ave

City, State, Zip: Charlotte N.C 28205

Daytime Telephone: 704-531-7663 Home Telephone: 704-548-0983

Property Address: 3401 Commonwealth Ave Charlotte N.C 28205

Tax Parcel Number: 12911134 Zoning District: _____

Subdivision Name: _____ Conditional District: YES NO

Applicant Certification and Designation of Agent

I (we) certify that the information in this application, the attached form(s) and documents submitted by me (us) as part of this application are true and correct. In the event any information given is found to be false, any decision rendered may be revoked at any time. I (we) hereby appoint the person named above as my (our) agent to represent me (us) in this application and all proceedings related to it. I (we) further certify to have received, read and acknowledged the information and requirements outlined in this packet.

Date

Property Owner

Date

Property Owner

✓

If yes, Petition Number:

[illegible]

✓

(b) The hardship of which the Applicant complains results from unique circumstances related to the Applicant's land. (Note: Hardships common to an entire neighborhood, resulting from overly restrictive zoning regulations, should be referred to the Charlotte-Mecklenburg Planning Department. Also, unique personal or family hardships are irrelevant since a variance, if granted, runs with the life of the land.)

(c) The hardship is not the result of the Applicant's own actions.

The backflow was installed per ^{City} building inspection. The city installed the backflow in the wrong spot. The hardship we may have caused by the owner.

(4) THE VARIANCE IS IN HARMONY WITH THE GENERAL PURPOSE AND INTENT OF THE ORDINANCE AND PRESERVES ITS SPIRIT. (State facts and arguments to show that the requested variance represents the least possible deviation from the letter of the Ordinance to allow a reasonable use of the land; and, that the use of the property, if the variance is granted, will not substantially detract from the character of the neighborhood.)

The desire that the backflow would be moved in no way affects the use of the land. The cost & the inconvenience to the elderly folks in the building outweighs by far the spirit. The spirit is would not be affected at all.

(5) THE GRANTING OF THE VARIANCE SECURES THE PUBLIC SAFETY AND WELFARE AND DOES SUBSTANTIAL JUSTICE. (State facts and arguments to show that, on balance, if the variance is denied, the benefit to the public will be substantially outweighed by the harm suffered by the Applicant.)

The denial does not benefit the public at all. The backflow's viability is not affected & has no bearing on the public. The cost to move the backflow would cause huge economic problems for the elderly that come to the center would have no place to go for the time the fire sprinkler system is off. The building can not be occupied while the system is off.

This letter gives authority to Chelsea Builders to act as agent of New Friends Adult Day Health, Inc. in addressing matters concerning the backflow preventer and its given setback on Woodland Dr. **This authority is granted by signature for this purpose only.**

New Friends Agent: Charles W. Walker

New Friends Adult Day Health, Inc.

In WITNESS WHEREOF, the parties have duly executed this Contract as of the date first above written.

Owner: Charles W. Walker

State of NC

County of Mecklenburg

I, Jacquette J Mangum, Notary Public for Mecklenburg County

Certify that Charles W. Walker personally appeared before me this day and

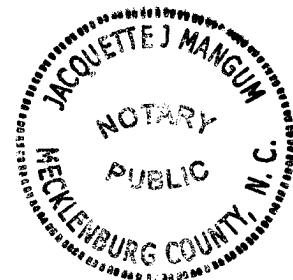
acknowledged that he/she is _____ of _____

and by that authority duly given and as the act of the corporation, affirmed that the information is true and correct.

Sworn to and subscribed before me this 24th Day of December, 2008,

Jacquette J Mangum
Notary Public

My Commission expires Aug 2, 2012



Parcel No

Permit No

Date

12911134

B 1920495

Issued To

For Inspections Call

Chelsea Builders Inc 336-

FAILURE TO POST THIS SIGN VISIBLE FROM THE MAJOR ACCESS WAY MAY DEL

For Inspectors' Use Only

B-68

