

Telephone:

Parcel:

(Area Code)

(IfApplicable)

(Signature)

GASTON COUNTY Department of Building & Development Services

Street Address:

128 W. Main Avenue, Gastonia, North Carolina 28052

PO Box 1578 Gastonia N.C. 28053-1578

Phone: (704) 866-3195 Fax: (704) 866-3966

HIDING AND	ornionalistations Withing Address. 1.O. Dox 1376, Gastonia	a, N.C. 20033-1378	1 ax. (704) 800-3700
GE	NERAL REZONING APPLICATION A	pplication Number: RE	Z-
Appl	icant Planning Board (Administrative)	Board of Commission (Administ	rative) ETJ
con	Telephone Numbers: (Area Code) Business Email: (Area Code) Business The applicant and property owner(s) are not the same Individual of the sent form from the property owner(s) or legal representative au	or group, the Gaston County Zoning Cothorizing the Rezoning Application.	
B.	OWNER INFORMATION Name of Owner: Mailing Address: Telephone Numbers: (Area Code) Business Email:	(Print Full Name)	Downer Chyn Dool Home
C.	PROPERTY INFORMATION Physical Address or General Street Location of Propert Parcel Identification (PID): 305/5 Acreage of Parcel: 4- Acreage to be Rezo	1C 08034	Thornburg
D.	PROPERTY INFORMATION ABOUT MULTIF	PLE OWNERS	
	Name of Property Owner:	Name of Property Owner:	
	Mailing Address:	Mailing Address:	:3
\searrow	(IncludeCity, State and Zip Code)	(Inclu	de City, State and Zip Code)

Telephone:

Parcel:

(*Area Code)

(IApplicable)

(Signature)

E. <u>AUTHORIZATION AND CONSENT SECTION</u>

(I/We), being the property owner(s) or heir(s) of the subject property re	
Application and having authorization/interest of property parcel(s)	
hereby give KICK ALLEN TR. (Name of Applicant)	consent to execute this proposed action.
Jul Costae Stullwell (Signature)	Col 27/25 Gaston Gaston County
(Signature) 1, Crystal R Crawford , a Notary	(Date) County My Comm. Exp. 05-24-2028
I, Crystal R Crowtood , a Notary State of North Carolina, hereby certify that \(\)	Public of the County of GOSTACAR
personally appeared before me this day and acknowledged the de	
Witness my hand and notarial seal, this theday of	
Chesta R Charles on a	05-24-2028 Commission Expiration
(I/We), also agree to grant permission to allow employees of Gaston (reasonable hours for the purpose of making Zoning Review .	County to enter the subject property during
Please be advised that an approved general rezoning does not guara wastewater disposal system (septic tank). Though a soil analysis is not and/or approval, the applicant understands a chance exists that the so disposal system thus adversely limiting development choices/uses understands.	ot required prior to a general rezoning submittal oils may not accommodate an on site wastewater
If the application is not fully completed, this will cause rejection of please return the completed application to the Planning and Deve County Administrative Building located at 128 West Main Avenue	elopment Services Department within the
please return the completed application to the Planning and Deve	elopment Services Department within the e, Gastonia, NC 28052.
please return the completed application to the Planning and Device County Administrative Building located at 128 West Main Avenue	elopment Services Department within the e, Gastonia, NC 28052. CATION ed representative, hereby certify that the
please return the completed application to the Planning and Device County Administrative Building located at 128 West Main Avenue APPLICATION CERTIFICATION (I,We), the undersigned being the property owner/authorized	elopment Services Department within the e, Gastonia, NC 28052. CATION ed representative, hereby certify that the
Please return the completed application to the Planning and Device County Administrative Building located at 128 West Main Avenue APPLICATION CERTIFICATION CERTIFICATION (I,We), the undersigned being the property owner/authorized information submitted on the subject application and any and application and any application and application and any application and application application and application application and application and application application and application application and application application and application app	cation CATION and representative, hereby certify that the applicable documents is true and accurate. Date
Please return the completed application to the Planning and Device County Administrative Building located at 128 West Main Avenue APPLICATION CERTIFICATION CERTIFICATION (I,We), the undersigned being the property owner/authorized information submitted on the subject application and any and Signature of Property Owner or Authorized Representative	cation of the control
Please return the completed application to the Planning and Device County Administrative Building located at 128 West Main Avenue APPLICATION CERTIFICATION	cation of the control
APPLICATION CERTIFI (I,We), the undersigned being the property owner/authorized information submitted on the subject application and any a Signature of Property Owner or Authorized Representative Note: Approval of this request does not constitute a zoning permit OFFICE USE ONLY OFFICE USE ONLY	CATION cd representative, hereby certify that the applicable documents is true and accurate. All requirements must be met within the UDO. NLY OFFICE USE ONLY Fee:
Please return the completed application to the Planning and Device County Administrative Building located at 128 West Main Avenue APPLICATION CERTIFICATION	CATION cd representative, hereby certify that the applicable documents is true and accurate. All requirements must be met within the UDO. NLY OFFICE USE ONLY Fee:
APPLICATION CERTIFI (I,We), the undersigned being the property owner/authorized information submitted on the subject application and any a Signature of Property Owner or Authorized Representative Note: Approval of this request does not constitute a zoning permit OFFICE USE ONLY Date Received: Received by Member of Staff: (Initials) COPY OF PLOT PLAN OR AREA MAP NOTARIZED AUTHORIZATION	copy of Deed elopment Services Department within the e., Gastonia, NC 28052. CATION ed representative, hereby certify that the applicable documents is true and accurate. All requirements must be met within the UDO. NLY OFFICE USE ONLY Fee: Receipt Number:
APPLICATION CERTIFI (I,We), the undersigned being the property owner/authorized information submitted on the subject application and any a Signature of Property Owner or Authorized Representative Note: Approval of this request does not constitute a zoning permit OFFICE USE ONLY Date Received: Received by Member of Staff: (Initials) COPY OF PLOT PLAN OR AREA MAP NOTARIZED AUTHORIZATION	elopment Services Department within the e., Gastonia, NC 28052. CATION ed representative, hereby certify that the applicable documents is true and accurate. All requirements must be met within the UDO. NLY OFFICE USE ONLY Fee: Receipt Number: COPY OF DEED PAYMENT OF FEE ate of Public Hearing: