



TOWN OF STANLEY

Department of Planning

Street Address: 416 Hwy 27 S, Stanley, North Carolina 28164

Phone: (704)263-4779

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Fax: (704)263-9699

GENERAL REZONING APPLICATION

APPLICATION: Z

A. APPLICANT INFORMATION

Name of Applicant: _____

Mailing Address: _____

Telephone: _____

Email: _____

B. OWNER INFORMATION

Name of Owner(s): _____

Mailing Address: _____

Telephone: _____

Email: _____

C. PROPERTY INFORMATION

Physical Address / General Location : _____

Parcel Identification # (six digit): _____ Current Use: _____

Total Acreage: _____ Acreage to be Rezoned: _____

Current Zoning: _____ Proposed Zoning: _____

D. PROPERTY INFORMATION ABOUT MULTIPLE OWNERS (if applicable)

Name of Property Owner(s): _____

Mailing Address: _____

Telephone: _____

Signature(s): _____

E. AUTHORIZATION AND CONSENT

I/We, being the property owner(s) or heir(s) of the subject property referenced on the Town of Stanley Rezoning Application and having authorization/interest of property parcel(s) _____

Hereby give _____ consent to execute this proposed action.

Signature

Date

Signature

Date

I, _____, a Notary Public of the County of _____, State of North Carolina, hereby certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument. Witness my hand and notarial seal, this the _____ day of _____, 20_____.

Notary Public Signature

Commission Expiration

I/We, also agree to grant permission to allow employees of the Town of Stanley to enter the subject property during reasonable hours for the purpose of making a Zoning Review and to post the subject property for the purpose of Public Hearing.

If the application is not fully completed, this will cause rejection or delayed review of the application.

Note: Approval of this request does not constitute a zoning permit. All requirements must meet the Town of Stanley Zoning Ordinance and Gaston County Building Inspections.

APPLICATION CERTIFICATION

I/We, the undersigned, being the property owner/authorized representative, hereby certify that the information submitted on the subject application and any applicable documents is true and accurate.

Signature

Date