



Chatham County Planning Department
PO Box 54/80-A East Street
Pittsboro, NC 27312
Ph: (919) 542-8204
Fax: (919) 542-2698

CHATHAM COUNTY APPLICATION FOR
AMENDMENT TO THE COMPACT
COMMUNITY ORDINANCE OR MAP

Applicant Information:

NAME: Vickers Bennet Group, LLC

ADDRESS: P.O. Box 935, Pittsboro, NC 27312

CONTACT PH: (919) 548-4153

EMAIL: antonio@iccbenjerry.com

Landowner Information:

NAME: Vickers bennet Group, LLC

ADDRESS: P.O. Box 935, Pittsboro, NC 27312

CONTACT PH: (919) 548-4153

EMAIL: antonio@iccbenjerry.com

PROPERTY IDENTIFICATION

Physical (911) Address: Various

PARCEL (AKPAR) No.: See attached list

Township: Williams Total Acreage: +/- 101.8 ac. Acreage added to CCO Boundary: +/- 70.70 acres

(Do not round acreage. Use exact acreage from tax record or survey).

Map Amendments to Ordinance:

Provide a map showing the existing compact community boundary including any proposed changes to the boundary and all properties requested to be added. **See the map "Compact Community Revised Boundary Exhibit" attached as Exhibit C. A full scaled paper map and a digital file showing the parcels in detail is being filed with this Application.**

Text Amendments to Ordinance

Section 6.1(D.) Page 3, Section _____ Page _____, Section _____ Page _____

Existing Language

See attached Exhibit A, Existing and Proposed Language of CCO Section 6.1

Requested Language Change:

See attached Exhibit A, Existing and Proposed Language of CCO Section 6.1

Reasons for requested text amendment:

See attached Exhibit B, Text Amendment Narrative

APPLICATION SUBMITTAL REQUIREMENTS

Attach the following as required in Section 19.4.C of the zoning ordinance:

1. Map of the property showing the parcel or portions thereof that are affected by this rezoning request. **Exhibit C.**
2. Written legal description of such land. **Attached Exhibit D.**
3. Mailing labels for all adjoining property owners. **Attached Exhibit E.**

Please address the following on a separate summary attachment: **See Attached Exhibit B.**

1. Any alleged error in the Ordinance, if any, which would be remedied by the proposed amendment
2. The changed or changing conditions, if any, which make the proposed text and map amendments reasonably necessary.
3. The manner in which the proposed text and map amendments will carry out the intent and purpose of the Comprehensive Plan or part thereof. **You must note specifics from the plan giving reference to page number and section.**

No application packets will be taken after 4pm. All fees must be paid at the time of application submittal. A mailing list (self-adhesive labels) of all adjoining property owners is required.

Application Fee: \$250.00

Fees are non-refundable once the public hearing notices are sent and even if the request is denied.

PLEASE SIGN THE MOST ACCURATE SIGNATURE OPTION BELOW (1, 2, OR 3)

(1) I hereby certify that **I am the owner or authorized agent of said property** and that the information provided is complete and the statements given are true to the best of my knowledge.

Vickers Bennett Group, LLC

By:

 Manager

Signature:

Date

Antonio McBroom, Mgr

Print Name

The owner must sign the following if someone other than the owner is making the application.

(2) I hereby certify that (please print) _____ is an authorized agent for said property and is permitted by me to file this application.

Signature

Date

Print Name

(3) I acknowledge that **I am not the landowner OR authorized agent** of the property for which this application is being made, but I do live within the zoned area of the county.

Signature

Date

Print Name

FOR OFFICE USE ONLY

Application No.: _____

Date Received: _____ 20 _____

Payment Received: \$ _____

Check No. _____

Cash

Credit Card

Money Order

Planning Department