

APPLICATION FOR
ZONING DISTRICTS
CONDITIONAL USE DISTRICTS
CONDITIONAL USE PERMITS

Chatham County Planning Department
P.O. Box 54
Pittsboro, NC 27312

Tel: 919-542-8204
Fax: 919-542-0527
Email: lynn.richardson@ncmail.net

(1) Applicant Information:

Name: Robert Blitchington
Address: 110 South Graham St.
Chapel Hill, N.C. 27516

Phone No. (h) _____
(w) (919) 929-8785
email: info@triangleelectrical.com

(2) Landowner Information (as shown on deed)

Name: Ferrellgas, L.P.
Address: One Liberty Plaza
Liberty, MO 64068

Phone No: (h) _____
(w) (816) 792-6150
email: _____

(3) Property Identification:

911 Address: 12085 U.S. 15-501 N
Chapel Hill, NC 27516

S.R. Name: U.S. 15-501
S.R. Number: _____

Township: Baldwin

Acreage: 1.0

Flood map # 3702990075B
date: 7/16/91

P.I.N # 2681
Parcel # 9776

Deed book: 722 Page: 564
Plat Book: _____ Page: _____

Zoning District: CUP: Propane Gas Store

Watershed District: WS II (Existing development)

Zone _____

(4) Requested Zoning District, Conditional Use District and/or Conditional Use Permit:

Amendment to Conditional Use District from Propane Gas Store to Contractor's Office and Shop

(5) Directions to property: West side of U.S. 15-501, less than a mile from the Chatham-Orange County line.

(6) Attach the following, if requesting a zoning map amendment:

- X List of names and addresses of current adjoining property owners (on back of this form)
- X Written legal description
- X Map of the property at a scale of not less than 1 inch equals 200 feet
- X Explanation of request addressing application portions of Section 17.3B and 18.2A of the Chatham County Zoning Ordinance.

(7) Attach Submission Materials Checklist information. (see attached)

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.

ROBERT BLITCHINGTON

Signature

Date

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

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

FERRELLGAS, L.P.

By: FERRELLGAS, INC.

Owner's Signature

Date

