

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: 919/542-2698
Email: angela.birchett@ncmail.net

(1) Applicant Information:

Name: Cole Park Veterinary Hospital
Address: 11500 US Hwy 15-501 N
Chapel Hill, N.C. 27517
Phone No: (h) _____
(w) (919) 929 – 3352
(m) _____
Email: _____

(2) Landowner Information (as shown on deed)

Name: Redd Dog, LLC
Address: 12171 US Hwy 15-501 N
Chapel Hill, N.C. 27516
Phone No: (h) _____
(w) _____
(m) _____
Email: _____

(3) Property Identification:

911 Address: 12171 US Hwy 15-501 N
Chapel Hill, N.C. 27517
S.R. Name: Woodbridge Drive
S.R. Number: 1613
Township: Baldwin
Acreage: 0.884 & 0.948
Flood map #: 3710977600J (7-13-2005)
Flood Zone: X

PARCEL#: 2683 & 2684
P.I.N #: 977601466305 & 977601466532
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Deed Book: 860 & 1357 Page: 0666 & 0787 Yr: 2001 & 2007
Plat Book: _____ Page: _____
Current Zoning District: RA-90
Watershed District: WS-IV (PA)

(4) Requested Zoning District, Conditional Use District, OR Conditional Use Permit:
Conditional Use Community Business

(5) Directions to property:

From Pittsboro travel north on US Highway 15-501, approximately 12 miles and turn left onto Woodbridge Drive. This parcel lies at the southwest quadrant of the intersection of Woodbridge Drive (S.R. 1613) and US Highway 15-501

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

- ☒ List of names and addresses or current adjoining property owners (see Adjacent Landowners form)
 - ☒ Written legal description
 - ☒ Map of the property at a scale of not less than 1 inch equals 200 feet
 - ☒ Explanation of request addressing applicable portions of Section 17.3B of the Chatham County Zoning Ordinance
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(7) Attach Submission Materials Checklist Information (see Submission Materials Checklist form)

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.

Signature

Date

The owner must sign the following if someone 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.

Signature

Date