



Zoning Map Amendment Application

OFFICIAL USE ONLY:

Case Number: _____
 Date Filed: _____
 Gate Keeper: _____
 Amount Paid: _____

Contact Information**APPLICANT:**

Name: The Cotton Gin Inc.
 Address: 6957 Caratoke Hwy
Jarvisburg, NC 27947
 Telephone: 252.207.2387
 E-Mail Address: tom@cottongin.com

PROPERTY OWNER:

Name: The Cotton Gin Inc.
 Address: PO Box 24
Jarvisburg, NC 27947
 Telephone: 252.207.2387
 E-Mail Address: tom@cottongin.com

LEGAL RELATIONSHIP OF APPLICANT TO PROPERTY OWNER: Self

Property Information

Physical Street Address: 6957 Caratoke Highway Jarvisburg, NC 27947
 Location: The Cotton Gin
 Parcel Identification Number(s): 010900001330000
 Total Parcel(s) Acreage: 5.45 (Recombined Acreage) Original Parcel acreage 3.25 (GIS)
 Existing Land Use of Property: Cotton Gin Retail Store

Request

Current Zoning of Property: Split GB and AG Proposed Zoning District: GB
 Total Acreage for Rezoning: 2.2 Are you rezoning the entire parcel(s): Yes/No
 Metes and Bounds Description Provided: Yes/No

Community Meeting, if Applicable

Date Meeting Held: April 10, 2020 Meeting Location: Sanctuary Vineyards

I, the undersigned, do certify that all of the information presented in this application is accurate to the best of my knowledge, information, and belief.

Further, I hereby authorize county officials to enter my property for purposes of determining zoning compliance. All information submitted and required as part of this application process shall become public record.

Thomas C Wright
 Property Owner(s)/Applicant*

4/21/20
 Date

***NOTE: Form must be signed by the owner(s) of record, contract purchaser(s), or other person(s) having a recognized property interest. If there are multiple property owners/applicants a signature is required for each.**

Zoning Map Amendment Design Standards and Submittal Checklist

The table below depicts the design standards of the site plan or map for a zoning map amendment application. Please make sure to include all applicable listed items to ensure all appropriate standards are reviewed.

Zoning Map Amendment

Site Plan Design Standards and Submittal Checklist

Date Received: _____

Project Name: _____

Applicant/Property Owner: _____

Site Plan or Map Design Standards Checklist		
1	Lot/parcel dimensions. REZONING SQ FT SHOWN	✓
2	Zoning designation.	✓
3	All existing physical features (structures, buildings, streets, roads, etc.). (AERIAL)	✓
4	Location and dimensions of any proposed construction. (UNKNOWN @ THIS TIME)	N/A

Zoning Map Amendment Submittal Checklist

Staff will use the following checklist to determine the completeness of your application within ten business days of submittal. Please make sure all of the listed items are included. Staff shall not process an application for further review until it is determined to be complete.

Zoning Map Amendment Submittal Checklist		
1	Complete zoning map amendment application	✓
2	Application fee (\$200 plus \$5 for each acre or part thereof) 2.17 ACRES TO BE REZONED (\$215)	✓
3	Community meeting written summary, if applicable	✓
4	Site plan or map REZONING MAP PROVIDED IN COMMUNITY	✓
5	Metes and bounds survey, if applicable MTS. SUMMARY	N/A
6	2 copies of plans or maps	✓
7	2 hard copies of ALL documents	✓
8	1 PDF digital copy of all plans AND documents (ex. Compact Disk – e-mail not acceptable)	✓

For Staff Only

Pre-application Conference

Pre-application Conference was held on _____ and the following people were present:

Comments
