CHATHAM COUNTY ROAD NAMING REQUEST FORM

• QUESTIONS: Any questions concerning this form should be directed to: Denise Suits, 919-545-8163 • RETURN COMPLETED FORM TO: Chatham County Emergency Operations, P. O. Box 613,

ALL INFORMATION BELOW MUST BE SEE

TOTAL DELOW MOST BE COMPLETED		
1. APPLICANT INFORMATION	2 TYPE OF PROT	
Name: Flaire Chiasso	2. TYPE OF REQUEST (check one box	
Address 10710 Pack Post Ro	Only	
City, State & Zip Code: Pitt slow no NC 27312	Private road or driveway	
Phone Number: (919) 542-4957	Renaming of road	
3 PROPERTY INFORMATION	Other	
3. PROPERTY INFORMATION	4. ROAD NAME INFORMATION**	
State Road Number (if applicable):	What is the existing road name (if	
Township where Road Originates: :Select one here	applicable)?	
will the road be part of a development?	applicable)? ROCK Rest Rd	
Yes No	I I	
If a development, is it:	What are the proposed or new road name(s)?	
A major development	· Buckeye Hollow	
A minor development	•	
Is it possible that this will be come a state road?	•	
Yes No No		
Length of road:	If existing name is to be changed, what is the	
	reason for this change? 3 residences on	
Type of road (check one answer only)	min drive well lesidences on	
Private Public _	001 2011	
5. DIRECTIONS TO ROAD (only needed if it is a pri	vate road).	
5. DIRECTIONS TO ROAD (only needed if it is a private road): From Pittsboro Old grahm Rol toward chicken Bridge. Cross own dry creeks turn Rt onto Rock Dest turn Rt onto \$ 1074. Stay		
10 to the contract of the cont		
dry creek form kit out the	TOTAL RET ONTO # 1074. STAY	
to the Rt to reach 1076 House		
6. ATTACHMENTS REQUIRED		
Names, addresses and phone numbers of ALL adjacent	property owners (see page 2) **	
• Signatures of at least 60% of adjacent property owners (see page 2).		
· Attached map with marked location of the road on the map.		
- Treatment map with marked location of the load on the map.		
**IMPODTANT, The County Decade CO		
**IMPORTANT: The County Board of Commissioners may consider a number of factors when		
naming or renaming a road, including the number of adjacent owners, acreage of ownership.		
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historical significance of a road name, and roads with similar names.

7. Signature of Applicant: Slain Chi	Date of Signature:	5/3/24
Date Submitted to County EOC:		7-7-1

IMPORTANT: If this form & required information is not completed and submitted properly, the petition is not valid.

SIGNATURES: We, the undersigned owners, PROVIDE A COMPLETE LIST OF ALL are in favor of the proposed road name ADJACENT PROPERTY OWNERS, INCLUDING NAME, ADDRESS & PHONE inserted here: (NOTE: Only sign below if you approve of the NUMBERS. road name above.) Name: Austin Lybrand Address: 1078 ROCK Bust Rd PHS HONNE Signature: Phone #: (919)604 - 1410 Name: Cari + Will Filer Signature: Address: PIN - 00109U2 Phone #: 19191260 - 6445 Name: Signature: Address: Phone #: Name: Signature: Address: Phone #: