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, Pittsboro, NC 27312

ALL INFORMATION BELOW MUST BE COMPLETED

1. APPLICANT INFORMATION	2. TYPE OF REQUEST (check one box
Name: Virginava-I Kathryn Whe Hen Address: 2105 Pathway Drive	only)
Address: 2105 Pathway Drive	Private road or driveway
City, State & Zip Code: chepe 1 151110 - 2756	Renaming of road
Phone Number: 919-619-066 \$	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)? No se
Will the road be part of a development?	i) River's Benching & Epertury What are the proposed or new road name(s)?
Yes No X.	What are the proposed of hew road hame(s).
If a development, is it:	· Bend in the River.
A major development	* Bend in the River Way
A minor development	· Beach in River
Is it possible that this will be come a state road?	If existing name is to be changed, what is the
Yes No	If existing name is to be changed, what is the
Length of road:	reason for this change?
Type of road (check one answer only)	" Ros 2,"
Private M Public	that would be
	great
5. DIRECTIONS TO ROAD (only needed if it is a p	
current driveway to 2994 Chicken Bridse Road	
6. ATTACHMENTS REQUIRED	
Names, addresses and phone numbers of ALL adjacen	
 Signatures of at least 60% of adjacent property owners (see page 2). 	
 Attached map with marked location of the road on the map. 	
**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,	
historical significance of a road name, and roads with	th similar names.
	. 63.844
7. Signature of Applicant () Soletan Date of Signature: 12/12/2024	
Date Submitted to County EOC:	
Date Submitted to County EOC.	

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

PROVIDE A COMPLETE LIST OF ALL ADJACENT PROPERTY OWNERS, INCLUDING NAME, ADDRESS & PHONE NUMBERS.	SIGNATURES: We, the undersigned owners, are in favor of the proposed road name inserted here: (NOTE: Only sign below if you approve of the road name above.)
Name: Virginal Wheten Address: 18 circulian way, chapel HILING Phone #: 518-330-1131	Signature: Virginia W. Wlatten
Phone #: 518-330-1131	
Name: Kathryn Whatte- Address: 2105 Pathwey Dove, Chifol HII, NC Phone #: 919-619-0665	Signature:
Name: William D. Spieler Jr. Address: p.o. 30x 5372 1 Phone #: 919 616-3743	Signature:
Name: Address: Phone #:	Signature:
Name: Address: Phone #:	Signature:
Name: Address: Phone #:	Signature:
Name: Address: Phone #:	Signature:
Name: Address: Phone #:	Signature:
Name: Address: Phone #:	Signature:
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