



APPLICATION ACCEPTANCE POLICY

WATERSHED PROTECTION ORDINANCE AMENDMENT

Chatham County
Planning Department

PO Box 54, Pittsboro, NC, 27312
Telephone 919-542-8204 | Fax 919-542-2698
www.chathamcountync.gov/planning

Chatham County understands that clear expectations make the application and development review processes easier for both applicants and staff. The policies outlined below will enable Planning and Watershed Protection Department staff to move the process along in a way that ensures that each application receives the attention it deserves. Staff desires to complete review of projects in an accurate and timely manner. Due to the preparation, reviews, and public hearing schedules, working with incomplete materials detracts from the timely review of applications.

1. Applications are to be reviewed for completeness by staff prior to being officially accepted for review. Applications that are dropped off or mailed in cannot be accepted without prior approval from the Watershed Administrator.
2. Checklists for each type of request are provided with each application package, if applicable. If the application does not contain all required items on the checklist, it will be considered incomplete and shall not be accepted.
3. Application fees must be paid at the time an application is submitted for acceptance. **Please provide ONE complete set of the application and all supporting materials when submitting.** More copies will be requested by the Planning or Watershed Protection Departments (16 sets) once the sufficiency review period has been completed.
4. In order to allow time to process fees, applications will not be accepted after 4:00 pm each day.
5. For your convenience, applicants may schedule an appointment with staff to review the application package before the official submission.

The Planning Department staff looks forward to working with you during the application process. If you have questions or need further assistance, please call 919-542-8233.



Chatham County Planning Department
PO Box 54/80-A East Street
Pittsboro, NC 27312
Ph: (919) 542-8204
Fax: (919) 542-2698

CHATHAM COUNTY APPLICATION FOR
AMENDMENT TO THE WATERSHED
PROTECTION ORDINANCE OR MAP

Applicant Information:

NAME: Manns Chapel II LLC (Sean McCall)
ADDRESS: 111 2nd Avenue North #302, St. Petersburg,
FL 33701
CONTACT PH: (727) 823-7219
EMAIL: sean@baycorpdev.com

Landowner Information (if applicable):

NAME: *See Attached Exhibit A*
ADDRESS: _____
CONTACT PH: _____
EMAIL: _____

PROPERTY IDENTIFICATION

Physical (911) Address: *See Attached Exhibit B* PARCEL (AKPAR) No.: 2641,2642
Township: Chapel Hill Total Acreage: 5.46 AC

(Do not round acreage. Use exact acreage from tax record or survey).

Map Amendments to Ordinance:

Provide a total of three maps. One map showing the existing watershed protection boundary, a separate map showing proposed changes to the boundary, and a third map showing current and proposed boundaries with existing surveyed topography to be signed and sealed by a NC licensed Surveyor or Engineer. The sealed map must also include stormwater flow/drainage/hydrology to demonstrate that water on one side of boundary flows to water supply watershed and water on other side of boundary flows away from water supply watershed.

Text Amendments to Ordinance

Section _____ Page _____, Section _____ Page _____, Section _____ Page _____

Existing Language

Requested Language Change:

Reasons for requested text amendment:

APPLICATION SUBMITTAL REQUIREMENTS

In addition to the map and/or text amendment information please include the following information:

1. Mailing labels for all adjoining property owners.

Please address the following on a separate summary attachment:

1. Any alleged error in the Ordinance, if any, which would be remedied by the proposed amendment
2. The changed or changing conditions, if any, which make the proposed text and map amendments reasonably necessary.
3. The manner in which the proposed text and map amendments will carry out the intent and purpose of the Comprehensive Plan or part thereof. **You must note specifics from the plan giving reference to page number and section.**

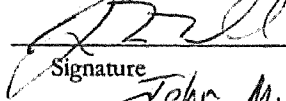
No application packets will be taken after 4pm. All fees must be paid at the time of application submittal. A mailing list (self-adhesive labels) of all adjoining property owners is required.

Application Fee: \$250.00

Fees are non-refundable once the public hearing notices are sent and even if the request is denied.

PLEASE SIGN THE MOST ACCURATE SIGNATURE OPTION BELOW (1, 2, OR 3)

(1) 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 _____
John M. McCall
Print Name

9/9/21
Date

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

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

Signature

Print Name

Date

(3) I acknowledge that **I am not the landowner OR authorized agent** of the property for which this application is being made, but I do live within the zoned area of the county.

Signature

Print Name

Date

APPLICATION SUBMITTAL REQUIREMENTS

In addition to the map and/or text amendment information please include the following information:

1. Mailing labels for all adjoining property owners.

Please address the following on a separate summary attachment:

1. Any alleged error in the Ordinance, if any, which would be remedied by the proposed amendment
2. The changed or changing conditions, if any, which make the proposed text and map amendments reasonably necessary.
3. The manner in which the proposed text and map amendments will carry out the intent and purpose of the Comprehensive Plan or part thereof. You must note specifics from the plan giving reference to page number and section.

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PLEASE SIGN THE MOST ACCURATE SIGNATURE OPTION BELOW (1, 2, OR 3)

(1) 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.

Meredith W. Rice JR
Signature

9/21/2021
Date

Print Name

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

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

Signature

Date

Print Name

(3) I acknowledge that I am not the landowner OR authorized agent of the property for which this application is being made, but I do live within the zoned area of the county.

Signature

Date

Print Name

FOR OFFICE USE ONLY

Application No.: PL- _____

Date Received: _____ 20 _____

Payment Received: \$ _____

☐ Check No. _____

☐ Cash

☐ Credit Card

☐ Money Order

Planning Department

Revised July 2021 hg/js

EXHIBIT A

Landowner Information

NAME: Manns Chapel II LLC

ADDRESS: Leon H Chaplin Jr PO Box 705, Linville NC, 28646

CONTACT PHONE: (727) 823-7219

EMAIL: sean@baycorpdev.com

NAME: The Pantry Inc & Circle K Stores Inc

ADDRESS: 1130 W Warner Rd Bldg BDC 17, Tempe, AZ 85284

CONTACT PHONE: (919) 774-6700

EXHIBIT B

Property Identification

(Parcel 2641)

PHYSICAL ADDRESS: 5186 Manns Chapel Rd, Chapel Hill, NC 27517

(Parcel 2642)

PHYSICAL ADDRESS: 11399 US 15 501 N, Chapel Hill, NC 27517