

Any Questions Concerning This Form Call:  
Denise Suits at 545-8163.  
Mail This Form Back To:  
Chatham County  
Emergency Operations  
P.O. Box 613  
Pittsboro, NC 27312

**ROAD NAMING REQUEST FORM**  
**ALL INFORMATION MUST BE COMPLETED**

(1) APPLICANT INFORMATION:

NAME Chatham Capital LLC  
ADDRESS 400 Market Street  
Chapel Hill, NC 27516  
PHONE NO. 919.933.4422

(2) TYPE OF REQUEST

(PLEASE CIRCLE ONE)  
PRIVATE ROAD/DRIVEWAY  
RENAMING ROAD  
OTHER \_\_\_\_\_

(2) PROPERTY INFORMATION:

S.R. NUMBER \_\_\_\_\_  
TOWNSHIP \_\_\_\_\_  
Will this be a development process?  
Yes  No \_\_\_\_\_  
(if yes; major  or minor \_\_\_\_\_  
Will it be a possibility that the state  
Will take this road over yes no

(4) EXISTING ROAD NAME:

PROPOSED ROAD NAME(S)  
Boxwood DRIVE  
STARWOOD DRIVE

Length of Road: \_\_\_\_\_  
Type of Road: (Circle one)  
Private  
Public

(5) Directions to Road (if private): off Mt. Gilced Church Rd - Sunset Grove Subdivision

(6) **ATTACH THE FOLLOWING:**

(1) NAME, ADDRESS, AND PHONE NUMBER OF ALL ADJACENT  
PROPERTY OWNERS

(2) SIGNATURES OF AT LEAST 60% OF ADJACENT PROPERTY  
OWNERS

(3) MARK LOCATION OF ROAD ON ATTACHED MAP

\*\* When naming a road the Chatham County Board of Commissioners may consider  
the number of adjacent owners, the acreage of ownership, historical significance of  
a road name, and roads with similar names. \*\*

REASON FOR ROAD NAME CHANGE: Per Chatham County

Signature of Applicant

Aurethorn

Date 8/17/16

\*\* Date turned into this office: \_\_\_\_\_

\*\* If all information is not completed properly the petition will not be valid\*\*