

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 Name: <u>Terry Gallagher</u> Address: <u>2449 LYSTRA</u> City, State & Zip Code: <u>CHAPL HILL N.C.</u> Phone Number: <u>440-725-2222</u>	2. TYPE OF REQUEST (check one box only) <input type="checkbox"/> Private road or driveway <input type="checkbox"/> Renaming of road <input type="checkbox"/> Other
3. PROPERTY INFORMATION State Road Number (if applicable): _____ Township(s) where Road Originates (check ONE): Albright <input type="checkbox"/> Baldwin <input type="checkbox"/> Bear Creek <input type="checkbox"/> Cape Fear <input type="checkbox"/> Center <input type="checkbox"/> Gulf <input type="checkbox"/> Hadley <input type="checkbox"/> Haw River <input type="checkbox"/> Hickory Mtn. <input type="checkbox"/> Matthews <input type="checkbox"/> New Hope <input type="checkbox"/> Oakland <input type="checkbox"/> Williams <input type="checkbox"/> Will this be part of a development? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If a development, is it: A major development <input type="checkbox"/> A minor development <input type="checkbox"/> Is it possible that this will become a state road? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Length of road: <u>600 FT.</u> Type of road (check one answer only) Private <input checked="" type="checkbox"/> Public <input type="checkbox"/>	4. ROAD NAME INFORMATION** What is the existing road name (if applicable)? _____ What are the proposed or new road name(s)? <u>*ANNIE WAY</u> <u>*ANNE G. WAY*</u> If existing name is to be changed, what is the reason for this change? <u>N/A</u>
5. DIRECTIONS TO ROAD (only needed if it is a private road): <u>Take 15/501 TO LYSTRA Turn right</u> <u>2-7 miles down or left is 2449 LYSTRA</u>	
6. ATTACHMENTS REQUIRED <ul style="list-style-type: none"> • Names, addresses and phone numbers of ALL adjacent property owners (see page 2).** <input checked="" type="checkbox"/> • Signatures of at least 60% of adjacent property owners (see page 2). <input checked="" type="checkbox"/> • 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 similar names.

7. Signature of Applicant: Terry Gallagher Signature Date: 7-1-17
 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 BELOW, INCLUDING NAME, ADDRESS & PHONE NUMBERS.	SIGNATURES: We, the undersigned owners, are in favor of the proposed road name inserted here: <u>Anne G. Way</u> (NOTE: Only sign below if you approve of the road name above.)
Name: <u>Charles Lawrence Stone</u> Address: <u>122 Carson Rd.</u> Phone #: <u>919-933-0587</u>	Signature: <u>Charles Lawrence Stone</u>
Name: <u>Grace E Kissling</u> Address: <u>124 Carson Rd.</u> Phone #: <u>919-969-6660</u>	Signature: _____
Name: <u>Brian Littlejohn</u> Address: <u>57 Carson</u> Phone #: <u>919-929-2551</u>	Signature: <u>[Signature]</u>
Name: <u>Gram Sorbman</u> Address: <u>1223 Lytra Rd</u> Phone #: <u>919 933-9938</u>	Signature: <u>[Signature]</u>
Name: <u>PATRICIA ESPERON</u> Address: <u>2223 Lytra Rd</u> Phone #: <u>919-933-3938</u>	Signature: <u>[Signature]</u>
Name: _____ Address: _____ Phone #: _____	Signature: _____
Name: _____ Address: _____ Phone #: _____	Signature: _____
Name: _____ Address: _____ Phone #: _____	Signature: _____
Name: _____ Address: _____ Phone #: _____	Signature: _____
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