

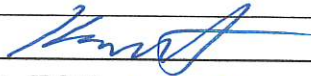
CHATHAM COUNTY ROAD NAMING REQUEST FORM

- **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

<p>1. APPLICANT INFORMATION</p> <p>Name: <u>Kaley Allred</u> Address: <u>7119 McLaughlin Rd</u> City, State & Zip Code: <u>Siler City, NC, 27344</u> Phone Number: <u>919-214-2338</u></p>	<p>2. TYPE OF REQUEST (check one box only)</p> <p><input checked="" type="checkbox"/> Private road or driveway <input type="checkbox"/> Renaming of road <input type="checkbox"/> Other</p>
<p>3. PROPERTY INFORMATION</p> <p>State Road Number (if applicable): Township where Road Originates: :Select one here Will the road be part of a development? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If a development, is it: A major development <input type="checkbox"/> A minor development <input checked="" type="checkbox"/> Is it possible that this will be come a state road? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Length of road: Type of road (check one answer only) Private <input checked="" type="checkbox"/> Public <input type="checkbox"/></p>	<p>4. ROAD NAME INFORMATION**</p> <p>What is the existing road name (if applicable)? <u>N/A</u></p> <p>What are the proposed or new road name(s)? • <u>Beginnings Rd</u> • •</p> <p>If existing name is to be changed, what is the reason for this change? <u>N/A</u></p>
<p>5. DIRECTIONS TO ROAD (only needed if it is a private road): <u>Follow 902 from Pittsboro to McLaughlin Rd</u></p>	
<p>6. ATTACHMENTS REQUIRED</p> <p>Names, addresses and phone numbers of ALL adjacent property owners (see page 2).**</p> <ul style="list-style-type: none"> • 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 similar names.

7. Signature of Applicant:  Date of Signature: 6/6/23
 Date Submitted to County EOC: 6-8-23

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

<p>PROVIDE A COMPLETE LIST OF ALL ADJACENT PROPERTY OWNERS, INCLUDING NAME, ADDRESS & PHONE NUMBERS.</p>	<p>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.)</p>
<p>Name: Richard Allred Address: 1189 mclaurin Rd Phone #: 919-930-4275</p>	<p>Signature: </p>
<p>Name: Kristie Allred Address: 1189 mclaurin Rd Phone #: 919-704-6562</p>	<p>Signature: </p>
<p>Name: Janice Inman Address: 1185 mclaurin Rd Phone #: 919-704-6562 919-704-5110</p>	<p>Signature: </p>
<p>Name: Paul Inman Address: 1185 mclaurin Rd Phone #: 919-704-6562 919-704-5110</p>	<p>Signature: </p>
<p>Name: Address: Phone #:</p>	<p>Signature:</p>
<p>Name: Address: Phone #:</p>	<p>Signature:</p>
<p>Name: Address: Phone #:</p>	<p>Signature:</p>
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