

**Application Fee: \$ 250.00**  
**(subdivision add \$10/lot)**

Note: Application must be complete and Application fee must be paid at time of submittal

OFFICE USE ONLY		
Application Number: _____	Date: _____	Receipt: _____
Related Projects: _____		

**PLANNED DEVELOPMENT SITE/SUBDIVISION**  
*A completed application must be submitted along with a and filing fee.*

Property Name: \_\_\_\_\_

Site Location: \_\_\_\_\_

*Please Note: If only a part of a parcel is requested to be rezoned, write "part" after the Wake County Parcel ID Number and Real ID Number.*

Wake County Parcel Identification Number(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zoning:

Total Acreage:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## PLANNED DEVELOPMENT

Petitioner(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Interest in Property: \_\_\_\_\_  
Owner, Agent, Lessee, Contract Purchaser, Other

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Property Owner(s): \_\_\_\_\_  
***If the Property Owner(s) is not the Petitioner(s), please attach a completed  
Owner's Authorization form.***

Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Ownership is evidenced by Deed recorded in Books of Deeds: \_\_\_\_\_  
Page \_\_\_\_\_, Wake County Register of Deeds

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Attorney: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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Site Designer: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

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### SIGNATURES (REQUIRED)

The undersigned states the above information is true and correct as (s)he is informed and believes.

\_\_\_\_\_  
Petitioner - Printed

\_\_\_\_\_  
Petitioner - Signature      Date

### NOTARY STATEMENT

Sworn to and subscribed before me the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. Notary  
Public in and for the State of North Carolina.  
My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public  
SEAL

\_\_\_\_\_  
Notary Public Printed      Date