| FOR STAFF USE ONLY |
|--------------------|
| Case No. |
| Date Rec'd |
| Rec'd by |
| Date Rec'd |

STREET NAME CHANGE APPLICATIONCITY OF GREENVILLE, NORTH CAROLINA

COMPLETED APPLICATION DUE NO LATER THAN FORTY (40) WORKING DAYS PRIOR TO PLANNING AND ZONING COMMISSION MEETING

| Part I | | | | |
|-------------------------------------------------------------------------|--|--|--|--|
| Applicant: | | | | |
| | | | | |
| | | | | |
| | | | | |
| Proposed Street Name : _ | | | | |
| Location: | | | | |
| | | | | |
| | | | | |
| · | | | | |
| Application initiated by: | | | | |
| [] Planning and Zoning Commission [] City Council [] City Department | | | | |
| [] Abutting Property Owner [] Other | | | | |

Part II

An application initiated by an abutting property owner to the subject street must be endorsed by the owner(s) of 60% or more of the lots which directly abut the subject street or portion thereof proposed for change and be submitted in conformance with Section A and B of this application.

Section A:

List of all owner(s) of lots abutting the subject street. Indicate by asterisk (*) those owners who have endorsed the change per Section B: (Attach additional sheets if necessary)

| | Mailing | Parcel | |
|------|---------|--------|-----------|
| Name | Address | No. | Signature |
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Section B: List of owner(s) endorsing the change meeting the 60% or more requirement: (Attach additional sheets if necessary) Mailing Parcel Address Signature Name No.

Indicate percentage endorsing the Street Name Change _______%.