

## **Application for Type 4 Modification**

Date of Application:			Sta	Staff - Date Received as Complete:			
Address for Which Modification is Requested:							
Site Zoning:	Site Use (Existing/Proposed)						
Decision: Approved/Not Approved:	City Council Meeting Date			P & ZC Meeting Date TRC Meeting Date:			
December 1 of Marketing O							
Reason(s) for Approval or Refusal of Modification; C	onditions Appro	vea:					
Jurisdictions Notified:							
Watershed:							
General Watershed Area (GWA)		D	esig	signated Water Supply Watershed			
Watershed Critical Area (WCA)			Ū				
Tion 4			0				
o Tier 1 o Tier 2			<ul><li>Mackintosh</li><li>Upper Randleman</li></ul>				
o Tier 3			0				
o Tier 4			0	o Other			
Applicant Contact Information:							
Name:		Mailing Addres	ss:				
		ag / ta a. o.					
Phone:		Email Address	S:				
Which criteria under 30-12-3.4.C.1 is met to qualify as a possible Type 4 Modification? (Staff Verification:							
Explain the purpose of the standard or regulation which is proposed to be modified:							
Explain proposed modification: (Provide drawings, plans or other materials to help explain proposal. Describe site constraints or other relevant information about							
the existing or proposed development that make compliance with the LDO provision difficult.)							

Ex	plain how this proposed modification meets at least one of the following criteri	a:				
1.	The proposed modification will result in equal or better performance than the standard that is being	modified.				
2	The size, topography or existing development of the property or of adjoining areas prevents complian	nce with a standard				
3.	A federal, state or local law or regulation prevents compliance with the standard.					
App	proval by Planning and Zoning Commission / City Council	Date:				
		Rev. 6/15/21				