

# TOWN OF HOLLY SPRINGS REZONING, COMPREHENSIVE PLAN AMENDMENT, & UDO AMENDMENT PACKET



General Use Rezoning, Conditional Zoning District, Comprehensive Plan Amendment,  
and Unified Development Ordinance Amendment

## General Information

A Traffic Impact Analysis (TIA) scope determination is required from Development Services prior to scheduling a Sketch Plan Review (Pre-Submittal) Meeting. The Request for TIA Scope, Form 8031 is available here: [www.hollyspringsnc.us/335/Sheet](http://www.hollyspringsnc.us/335/Sheet). Please contact Development Services at (919) 557-3908 for more information.

A Sketch Plan Review (Pre-Submittal) Meeting must be held a minimum of five (5) business days prior to but no more than 8 weeks before the Petition Submittal Deadline as specified on the appropriate submittal calendar. Please email [developmentervices@hollyspringsnc.gov](mailto:developmentervices@hollyspringsnc.gov) to schedule a Sketch Plan Review (Pre-Submittal) Meeting. For more information, contact Development Services at (919) 557-3908, select option 3 from the menu.

During the Sketch Plan Review (Pre-Submittal) Meeting, it will be determined whether a request for Zoning Map Change to a General Use District or Conditional Zoning District will be appropriate.

## Submittal Requirements

**All information required as part of your petition must be submitted as one (1) pdf file on the Holly Springs City View Portal: <https://cityview.hollyspringsnc.us/portal>. You must register an account and then click on "Apply for a Planning & Zoning Review" underneath "Preliminary Development Approval."**

### Zoning Map Change/ Comprehensive Plan Amendment/UDO Text Amendment:

- Submit the following number of copies:  
(1) PDF format version

### Zoning Map Change- General Use District:

The following items must be submitted with the Petition for Zoning Map Change to a General Use District to be deemed a complete submittal:

- Vicinity Map
- Petition Form
- Processing Fees (make check payable to: Town of Holly Springs)
- Plan Consistency Statement
- Affidavit of Owner Notification (required if Applicant **is not** the property owner)
- Affidavit of Owner's Consent
- Traffic Impact Analysis
- Property survey/legal description (required only if request does not include the entire tax parcel) in both hard copy and digital to the FTP website in Word format. Note: All legal descriptions are to contain references to inorganic monuments, and that all starting references on surveys or legal descriptions describe a course and distance from either the closest NCGS monument or Town of Holly Springs monument, regardless of the distance thereto.
- Neighborhood Meeting Report

#### FOR MORE INFORMATION:

Current Development Services Petition Fee Schedule:  
[www.hollyspringsnc.us/2170/Development-Services](http://www.hollyspringsnc.us/2170/Development-Services)

Review Process: Unified Development Ordinance Chapter 11

Review Calendar: See Town of Holly Springs Development Procedures Manual (DPM) Appendix 1.

General Use Rezoning Schedule

Conditional Zoning District Rezoning Schedule

### Zoning Map Change- Conditional Zoning District:

The following items must be submitted with the Petition for Zoning Map Change to a Conditional Zoning District to be deemed a complete submittal:

- |   |  |
|---|--|
| <input type="checkbox"/> Vicinity Map   | <input type="checkbox"/> Development and Design Manual   |
| <input type="checkbox"/> Petition Form  | <input type="checkbox"/> Property survey/legal description (required only if request does not include the entire tax parcel) in both hard copy and digital to the FTP website in Word format. Note: All legal descriptions are to contain references to inorganic monuments, and that all starting references on surveys or legal descriptions describe a course and distance from either the closest NCGS monument or Town of Holly Springs monument, regardless of the distance thereto. |
| <input type="checkbox"/> Processing Fees (make check payable to: Town of Holly Springs)                           | <input type="checkbox"/> Affidavit of Owner's Consent  |
| <input type="checkbox"/> Plan Consistency Statement   | <input type="checkbox"/> Neighborhood Meeting Report   |
| <input type="checkbox"/> Affidavit of Owner Notification (required if Applicant <b>is not</b> the property owner) |  |
| <input type="checkbox"/> Traffic Impact Analysis  |  |
| <input type="checkbox"/> Conditional Zoning District Design Goals Narrative                                       |  |
| <input type="checkbox"/> Conditional Zoning District Master Plan  |  |

### Comprehensive Plan Amendment:

The following items must be submitted with the Petition for Comprehensive Plan Amendment to be deemed a complete submittal:

- |   |  |
|---|--|
| <input type="checkbox"/> Vicinity Map   | <input type="checkbox"/> Property survey/legal description (required only if request does not include the entire tax parcel) in both hard copy and digital to the FTP website in Word format. Note: All legal descriptions are to contain references to inorganic monuments, and that all starting references on surveys or legal descriptions describe a course and distance from either the closest NCGS monument or Town of Holly Springs monument, regardless of the distance thereto. |
| <input type="checkbox"/> Petition Form  | <input type="checkbox"/> Neighborhood Meeting Report   |
| <input type="checkbox"/> Processing Fees (make check payable to: Town of Holly Springs)     |  |
| <input type="checkbox"/> Statement of Comprehensive Plan Future Land Use Plan Compatibility |  |

### UDO Text Amendment:

The following items must be submitted with the Petition for UDO Text Amendment to be deemed a complete submittal:

- Petition Form
- Processing Fees (make check payable to: Town of Holly Springs)
- Statement of Justification including:
  - Existing UDO language
  - Proposed UDO language (**bold** additions to the text and ~~strike through~~ text to be removed)
  - Justification for the amendment

## Submittal Specifications:

### **Plan Consistency Statement: (Zoning Map Change)**

A written statement that includes a description of the proposed area for zoning map change and its relationship to the surrounding land uses and zoning; the compatibility of the request with the Vision Holly Springs: Town of Holly Springs Comprehensive Plan; and any other supporting information regarding the request. The statement must provide evidence, not hearsay, on how the current zoning is not the highest and best use for the property and that the proposed zoning is the highest and best use for the property.

### **Statement of Comprehensive Plan Future Land Use Plan Compatibility: (Land Use Plan Amendment)**

A written statement that includes a description of the proposed area for land use designation modification and its relationship to the surrounding future and existing land uses; the compatibility of the request with the vision, intent and goal of Vision Holly Springs: Town of Holly Springs Comprehensive Plan; and any other supporting information regarding the request. The statement must provide evidence on how the current land use designation is not the highest and best use for the property and that the proposed designation would result in a land use pattern that will enhance the quality of life and its appropriateness to the Town's growth and development.

### **Traffic Impact Analysis:**

A Traffic Impact Analysis (TIA) may be required to verify that there are adequate transportation facilities for the proposed development. This report must be submitted, reviewed, and approved prior to the project being scheduled for review by the Planning Board and Town Council.

### **Affidavit of Owner Notification:**

If the Applicant for the proposed Zoning Map Change (either General Use or Conditional Zoning District) is not the property owner, the Applicant shall certify to the Town Council that all record owners of the property as shown on the Wake County tax listing has received actual notice of the proposed Zoning Map Change request and a copy of the notice of public hearing. The person(s) mailing such notices required to provide this notice shall certify to the Town Council that proper notice has been provided.

### **Property Survey/Legal Description:**

If the proposed Zoning Map Change Petition is only for a portion of an existing parcel of land, a recent property survey map (not exceeding 24" X 36") and written metes and bounds description of the area to be considered for Zoning Map Change is to accompany the Petition at time of submittal in digital (Word) version. All legal descriptions are to contain references to inorganic monuments, and that all starting references on surveys or legal descriptions describe a course and distance from either the closest NCGS monument or Town of Holly Springs monument, regardless of the distance thereto.

### **Conditional Zoning District Requirements (UDO Section 11.16):**

If the proposed Zoning Map Change Petition is for a Conditional Zoning District, the following additional application materials must be submitted with the initial application:

1. Design Goals Narrative: A narrative that lists the Conditional Zoning District Design Goals as provided in Section 2.4 of the Unified Development Ordinance. The narrative shall provide an analysis of how the proposed Conditional Zoning District is consistent with those goals.
2. Conditional Zoning District Master Plan: A Master Plan for the specific Conditional Zoning District that establishes the future regulatory components for land use, transportation/mobility, and open space/preservation in the Conditional Zoning District.
3. Development and Design Manual: A Development and Design Manual that establishes the land use, development, and design requirements for the properties within the proposed Conditional Zoning District that coincides with the Conditional Zoning District Master Plan.

**Affidavit of Owner's Consent:**

If the proposed Zoning Map Change Petition is for a Conditional Zoning District, all record owners of the property (i.e. both husband and wife; if the record owner is deceased, then applicant shall provide a title opinion written by a licensed attorney indicating all owners of the property, with an affidavit from each owner) as shown on the Wake County tax listings must sign the Petition. If the Property Owner(s) are granting authority to a designated agent, an Affidavit of Owner's Consent must accompany the Petition at time of submittal.

**Neighborhood Meeting (UDO Section 11.5):**

Before submitting an application, the Petitioner must hold at least one (1) neighborhood meeting and submit to Development Services a written summary report of the neighborhood meeting. The purpose of the neighborhood meeting is to educate neighbors about the proposed Petition, to receive neighborhood comments, and to address concerns about the Petition. At least one neighborhood meeting shall be scheduled and held by the Petitioner or Petitioner's Agent.

**Meeting Notification:**

The neighborhood meeting notifications shall include the following minimum information pertaining to the application:

1. Project and applicant names;
2. Location of proposed action (i.e., address or major cross streets);
3. Description of the UDO application/permit;
4. Time, date, and location of the neighborhood meeting. For virtual meetings, the notice shall include a weblink and access numbers (as applicable);
5. The telephone number and email address to contact the applicant hosting the neighborhood meeting.

The applicant shall post a sign on the property with the Time, date, and location of the neighborhood meeting.

**Meeting Location:**

The neighborhood meeting shall occur at a physical location and/or in a web-based (virtual) format.

1. For physical meetings, the venue, whether in a building or outside, shall be rated to accommodate at least 50 participants (pursuant to fire capacity restrictions). The applicant shall be responsible for reserving the venue/building, obtaining all leases/approvals, and paying all applicable fees.
2. For web-based meetings, the applicant shall utilize readily available software that is free to access for the public.

**Meeting Format (Information Presented):**

The applicant shall schedule a neighborhood meeting for at least a one hour duration. The meeting shall occur on a Monday, Tuesday, Wednesday, or Thursday and not on nationally recognized holidays. The meeting shall occur between the hours of 4:00pm and 8:00pm. At a minimum, the applicant shall orally explain the proposed application in terms of location, size, and proposed land uses and density, and the requested action from the Town. The applicant shall solicit written and/or oral comment from the participants.

# REZONING, COMPREHENSIVE PLAN/ UDO AMENDMENT PETITION



The current Filing Fees can be found on-line in the Town of Holly Springs Fee Schedule: [www.hollyspringsnc.us/2170/Development-Services](http://www.hollyspringsnc.us/2170/Development-Services)

## Petition Type (check one- each request must be on separate petitions)

- Zoning Map Change:  General Use District **or**  Conditional Zoning District
- Comprehensive Plan Amendment (check all that apply)
  - Text Amendment
  - Future Land Use Map Amendment
  - Area/Corridor Plan Map Amendment / Name: \_\_\_\_\_
- UDO Amendment (UDO Section: \_\_\_\_\_)

For DS Use only

Project # \_\_\_\_\_

Fees Paid: \$ \_\_\_\_\_

Date Received: \_\_\_\_\_

Initial  Revised  Final

## Project Information

Project Name: \_\_\_\_\_

Project Location: \_\_\_\_\_

*Use street address. If none, use the closest intersection*

- Within Corporate Limits
  - Within Holly Springs ETJ
  - Pending Annexation
- PIN: \_\_\_\_\_ Real Estate ID: \_\_\_\_\_

Project Acreage: *(Rounded to nearest tenth)* \_\_\_\_\_ Partial Parcel:  No  Yes

Sketch Plan Review (Pre-Submittal) Meeting Date: \_\_\_\_\_

**If the Sketch Plan Review (Pre-Submittal) Meeting Date is not within 8 weeks of the submittal date, another Sketch Plan Review (Pre-Submittal) Meeting is required prior to submittal.**

## Petition Request

Current Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Current Future Land Use Designation: \_\_\_\_\_

Proposed Future Land Use Designation: \_\_\_\_\_

Area Plan Designation (if applicable): \_\_\_\_\_

## Petition Contact Information (complete each contact in its entirety- please print or type)

### Project Applicant/Contact

(check one)  Owner  Owner's Agent  Design Professional  Developer  Other \_\_\_\_\_

Is the applicant applying on behalf of the property owner(s)?  Yes  No If yes, please complete the Affidavit of Property Owner Consent form and attach. If applicant contact is not the Owner or representing the Owner(s), please complete Property Owner Notification Affidavit and attach.

Name \_\_\_\_\_ Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

How would you like to receive staff review comments?  E-Mail  US Mail

How would you like to receive Official Action Notices?  E-Mail  US Mail- Certified

### Property Owner(s) if different than Applicant/Contact-REQUIRED *attach additional sheets if necessary*

Name \_\_\_\_\_ Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

How would you like to receive staff review comments?  E-Mail  US Mail

How would you like to receive Official Action Notices?  E-Mail  US Mail- Certified

## Owner's Authorization

Owner's Signature(s) \_\_\_\_\_ PIN/REID \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# PLAN CONSISTENCY STATEMENT



Describe how the proposed Zone Map Change request is consistent or supported by the objectives and policies of *Vision Holly Springs: Town of Holly Springs Comprehensive Plan* and how it is inconsistent with the Plan.

You must respond to each section; please type or print legibly in blue or black ink

## Project Information:

Project Name: \_\_\_\_\_

Proposed Zoning District: \_\_\_\_\_

Proposed Land Use/Density: \_\_\_\_\_

Future Land Use Plan Map Designation: \_\_\_\_\_

Future Land Use Plan Designation Land Use/Density: \_\_\_\_\_

For DS Use only

Project # \_\_\_\_\_

Date Received: \_\_\_\_\_

## Plan Consistency Statement:

In accordance with NCGS § 160D-605 prior to adopting or rejecting any zoning amendment, the Town Council shall adopt a statement of zoning consistency or inconsistency. Please include as much detailed information about the proposed zoning change and developer offered conditions (if any) or unique conditions associated with this request that support the Town's comprehensive plan objectives and/or policies and why the proposed zoning change is reasonable and in the public interest. If the proposed zoning amendment is not in compliance with the comprehensive plan, the Town Council is required to determine why the proposed zoning change is reasonable and in the public interest if approved. Please provide detailed documentation to assist the Council in making their determination. *Attach Additional Sheets as needed*

## Petitioner's Response

### Executive Summary

### Section 1: Future Land Use & Community Character

### Section 2: Transportation / Comprehensive Transportation Plan

**Section 3: Parks, Recreation & Open Space/Beyond the Green: A Parks & Recreation Master Plan**

**Section 4: Community Facilities**

**Section 5: Infrastructure and Utilities**

**Section 8: Natural Resources**

**Plan Consistency Response Prepared by:**

Preparer's Signature(s)

Date

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# NEIGHBORHOOD MEETING REPORT



Before submitting an application, the Petitioner must hold at least one (1) neighborhood meeting and submit to Development Services a written summary report of the neighborhood meeting.

Neighborhood Meeting Date: \_\_\_\_\_  
Time: \_\_\_\_\_  
Location: \_\_\_\_\_

|   |
|---|
| For DS Use only   |
| Project # _____   |
| Date Received: _____  |
| <br>  |
| <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete |

**Notification of Owners:**

1. The Petitioner or Petitioner's Agent shall prepare a Neighborhood Meeting Notification to be sent via first class mail to the owner(s) of the land specified on the Petition, owner of land within a 300 foot radius of the subject property, and any homeowners association or property owners association that represents any parcels within that area as shown on the county tax listings.
2. The Notice shall include the date, time, and location of the Neighborhood Meeting; the name of the Petitioner; the location of the proposed request (address, tax property identification number, or metes and bounds description); and an explanation of the nature of the request.
3. The Notice shall be deposited in the mail not less than ten (10) days nor more than 25 days before the date of the Neighborhood Meeting.
4. The applicant shall post a sign on the property with the Time, date, and location of the neighborhood meeting.

Date of Notification Mailing: \_\_\_\_\_

**Conduct of Meetings:**

At the Neighborhood Meeting, the Petitioner shall explain the proposal and petition, answer any questions, respond to concerns neighbors have about the petition and proposed resolutions to these concerns. Town Staff will not attend the Neighborhood Meeting.

Summary of Issues:

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*Attach Additional Sheets as needed*

Changes made to the Petition by the Petitioner as a result of the meeting:

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*Attach Additional Sheets as needed*

**Additional attachments required for the report:**

- A listing of those persons and organizations that were sent notification about the Neighborhood Meeting.
- A copy of the signed attendance list that includes names and addresses of those in attendance.

**Neighborhood Meeting Report Prepared by:**

Preparer's Signature(s)

Date

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# AFFIDAVIT OF OWNER NOTIFICATION



The following Affidavit of Owner Notification shall be provided at time of petition submittal if the Applicant is requesting a Zoning Map Change for property(s) he/she does not own at the time of the petition submission.

The following form or a separately prepared document in substantially the same form may be used for submitting the Notice of the requested Zoning Map Change and the public hearing in association with a request for a Zoning Map Change to the property owner(s). **The form must be sent to the owner(s) via certified mail.** This Affidavit is to be signed by the Applicant of the requested Zoning Map Change and have attached thereto the USPS green certified mail receipt and a copy of the form sent to the owner(s) to ensure that all record owners of the property have been notified by the Applicant(s).

|                      |
|----------------------|
| For DS Use only      |
| Project # _____      |
| Date Received: _____ |

## AFFIDAVIT

STATE OF NORTH CAROLINA  
COUNTY OF WAKE

I hereby certify to the Town of Holly Springs that the owner of the property described by Wake County Real Estate ID \_\_\_\_\_ and PIN \_\_\_\_\_ was served the notification attached to this Affidavit indicating the requested zoning map change petition and public hearing date and time. As evidence of the service of the notification, I hereby attach the return receipt from the certified mailing of this notice.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Applicant Signature \_\_\_\_\_

Printed name of Applicant \_\_\_\_\_

## 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 Printed

Seal

*Attached thereto the USPS green certified mail receipt and a copy of the form sent to the owner(s)*

**NOTIFICATON TO PROPERTY OWNER**

Dear Property Owner,

I am requesting the Holly Springs Town Council to rezone your property described by:

Wake County Real Estate ID# \_\_\_\_\_

and PIN \_\_\_\_\_

located at \_\_\_\_\_

from \_\_\_\_\_ (existing zoning district) to

\_\_\_\_\_ (proposed zoning district).

The public hearing before the Holly Springs Town Council on the matter will

be heard on \_\_\_\_\_ (date) at 7:00 PM.

Additional information can be obtained by contacting Holly Springs Development Services at (919) 557-3908.

Thank you,

Signature of Applicant:

Date:

\_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_ Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # ( ) \_\_\_\_\_ Fax # ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

# AFFIDAVIT OF OWNER CONSENT



If the Owner(s) of the subject property is giving authorization for another person to apply for a General Use or Conditional Zoning District on their property, this affidavit must be completed and signed by all record owners of the subject property.

The persons listed below do hereby appear before a Notary Public and swear or affirm that they are the legal owners of the described property, and further give authorization to

\_\_\_\_\_ of \_\_\_\_\_  
(Name of Representative) (Name of Company)

to submit a Petition for Zoning Map Change for my (our) property from

\_\_\_\_\_ to \_\_\_\_\_  
(Current Zoning District) (Proposed Zoning District)

and to offer additional use and/or standard restrictions as a part of the request for a Conditional Zoning District.

|                      |
|----------------------|
| For DS Use only      |
| Project # _____      |
| Date Received: _____ |

Signature of Owner(s):

Wake County PIN/REID:

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

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

State of \_\_\_\_\_

County of \_\_\_\_\_

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 Printed

Seal

# TERMINATION OF CONDITIONAL USE



The following Notice of Termination of Conditional Use Permit form or a separately prepared document in substantially the same form may be used for submitting the Termination of Conditional Use Permit in association with a request to terminate a Conditional Use District. The attached form is intended to meet the recording standards of the Wake County Register of Deeds.

## Standard Document Criteria

A standard document meets the following criteria. If a document fails to meet any one of these criteria, the non-standard document fee will be added.

- Paper size is 8.5" x 11" or 8.5" x 14"
- Blank margin of 3" at top of first page.
- Blank margin of at least 1/4" on remaining sides of first page and on all sides of subsequent pages.
- Typed or printed in black on white paper in a legible font.
- A font size no smaller than 9 point shall be considered legible.
- Blanks in an instrument may be completed in pen and corrections to an instrument may be made in pen.
- One-sided only.
- Instrument type is stated at center of first page.

Prepared By: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Returned To: Town of Holly Springs Development Services  
P.O. Box 8  
Holly Springs, NC 27540

**Instrument Type: Other – Notice of Termination of Conditional Use Permit**

TOWN OF HOLLY SPRINGS  
ZONING PETITION

DPM Appendix #A.02  
Supplement 18  
March 2022

# TERMINATION OF CONDITIONAL USE



This Notice of Termination of Conditional Use Permit confirms that the restrictions, terms, and conditions contained in the Conditional Use Permit recorded in Book \_\_\_\_\_ page \_\_\_\_\_, Wake County Registry have changed, are now null and void, and have no binding force of effect due to a rezoning of the parcels of property described below as confirmed in the Town of Holly Springs zoning map change petition # \_\_\_\_\_ - REZ - \_\_\_\_\_ which was approved by the Holly Springs Town Council on or about the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

The parcels of real property are identified as follows:

(Legal Description, or, Real Estate ID, PIN, & Acreage)

The undersigned current property owner and the Town of Holly Springs request that this Notice of Termination of Conditional Use Permit be recorded with the Wake County Register of Deeds and give notice that the above-referenced parcels of real property are released from all of the restrictions, terms, and conditions contained in the Conditional Use Permit.

IN WITNESS WHEREOF, Owner has executed this instrument this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_,

(Individual Owner)

Signature \_\_\_\_\_(Seal)

Signature \_\_\_\_\_(Seal)

Printed \_\_\_\_\_

Printed \_\_\_\_\_

(Individual Acknowledgment)

STATE OF \_\_\_\_\_)

) SS:

COUNTY OF \_\_\_\_\_)

Before me, a Notary Public in and for said County and State, personally appeared \_\_\_\_\_, Owner(s) of the real estate described above who acknowledged the execution of the foregoing instrument and who, having been duly sworn, stated that any representations therein contained are true.

Witness my hand and Notarial Seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature \_\_\_\_\_

Printed \_\_\_\_\_

My Commission expires: \_\_\_\_\_



(Organization Owner)

Signature \_\_\_\_\_ (Seal)

By \_\_\_\_\_

Printed \_\_\_\_\_

Title \_\_\_\_\_

(Organization Acknowledgment)

STATE OF \_\_\_\_\_ )

) SS:

COUNTY OF \_\_\_\_\_ )

I, a Notary Public for said County and State, certify that \_\_\_\_\_ personally came before me this day and acknowledged that he/she is the \_\_\_\_\_ of \_\_\_\_\_, a (corporation, limited liability company, partnership) (strike inapplicable) and that by authority duly given as the act of the corporation the foregoing instrument was signed in its name by its \_\_\_\_\_ sealed with its corporate seal, and attested by himself/herself as its \_\_\_\_\_.

Witness my hand and Notarial Seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature \_\_\_\_\_

Printed \_\_\_\_\_

My Commission expires: \_\_\_\_\_

This instrument was prepared by \_\_\_\_\_.

**CERTIFICATION FOR RECORDING**

I hereby certify that the Termination of Conditional Use Permit contained herein was consented to by the Town of Holly Springs on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_, in connection with a request for a new zoning district pursuant to zoning map change petition #\_\_ - REZ - \_\_\_\_, and that this Termination of Conditional Use Permit has been approved for recording in the Office of the Wake County Register of Deeds.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed

\_\_\_\_\_  
Title

**STATE OF NORTH CAROLINA  
COUNTY OF WAKE**

I, \_\_\_\_\_, Review Officer of Wake County, certify that the Conditional Use Permit to which this Certification is affixed meets all statutory requirements for recording.

\_\_\_\_\_  
Review Officer

\_\_\_\_\_  
Date

STATE OF \_\_\_\_\_ )  
  ) SS:  
COUNTY OF \_\_\_\_\_ )

Before me, a Notary Public in and for said County and State, personally appeared \_\_\_\_\_, Owner(s) of the real estate described above who acknowledged the execution of the foregoing instrument and who, having been duly sworn, stated that any representations therein contained are true.

Witness my hand and Notarial Seal this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature \_\_\_\_\_

Printed \_\_\_\_\_

My Commission expires: \_\_\_\_\_