



# REZONING PACKET

Rezoning, Comprehensive Plan Amendment & UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## Pre-Submittal Requirements

- Special Study Scoping meetings for Traffic and Water Resources are required to occur prior to your Sketch Plan (pre-application) meeting. These meetings will be held virtually. Please review the Town's [Water Resource Management Policy](#). Complete the [Traffic Scoping and Water Resource Inventory Request and Water Resource Inventory Forms](#) and email to [DSIntake@hollyspringsnc.gov](mailto:DSIntake@hollyspringsnc.gov) to schedule your scoping meeting.
- A Neighborhood Meeting is required to occur prior to your submittal. The requirements for this meeting can be found in section 11.5 of the [Unified Development Ordinance \(UDO\)](#). The Neighborhood Meeting shall take place no more than 12 weeks prior to the application date and can be held virtually. A copy of the Neighborhood Meeting Notice must be sent to [DSIntake@hollyspringsnc.gov](mailto:DSIntake@hollyspringsnc.gov) prior to mailing for review and approval along with a copy of the mailing list.
- A Sketch Plan Review (Pre-Application) 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.

To schedule a Sketch Plan (Pre-Application) Meeting, register for an account on the [Portal](#) and apply for a Planning & Zoning Review ~> Pre-Application Meeting.

The full review procedures for Rezonings can be found in the Town of Holly Springs [Unified Development Ordinance \(UDO\)](#).

Visit [www.hollyspringsnc.us/2170/Development-Services](http://www.hollyspringsnc.us/2170/Development-Services) for a current fee schedule and review calendars.

## Submittal Requirements

All items listed are required for a complete submittal. Incomplete submittals will be rejected and delay the process.

Submit the following items via the [Portal](#). All complete applications submitted by Noon on Friday will be reviewed by staff the following Monday. If your application is deemed complete and can move forward, you will be notified of any fees to be paid no later than Noon on Wednesday. Fees must be paid before your project is routed for review. Incomplete submittals will be rejected. A complete submittal includes:

- A completed submittal checklist including all items listed on the checklist
- Special Study reviews must be submitted concurrently with your Rezoning and Development Plan review.

For questions about your submittal, please review our [Digital Submittals Webpage](#) and reach out to [DSIntake@hollyspringsnc.gov](mailto:DSIntake@hollyspringsnc.gov)



# REZONING PETITION

Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

**PETITION CONTACT INFORMATION** (Attach additional sheets if needed)

**Applicant and Financially Responsible Party will need to register for an account on the Portal.**

**Project Applicant** Check One:  Owner  Owner's Agent  Design Professional  Developer  Other

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------

**Design Professional**

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------

**Developer**

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------

**Architect**

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------

**Landscape Architect**

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------

**Financially Responsible Party (REQUIRED)**

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------

**Property Owner (REQUIRED)**

Name:	Company:
-------	----------

Mailing Address:

City, State, Zip:

Telephone:	E-Mail:
------------	---------



<b>PETITION TYPE – each request must be a separate application in the Portal</b>	
<input type="checkbox"/>	Zoning Map Change – General Use District
<input type="checkbox"/>	Zoning Map Change – Conditional Zoning District
	<input type="checkbox"/> Option 1 Plan: Development Plan or Subdivision Plan (Preliminary Plat)
	<input type="checkbox"/> Option 2 Plan: Master Plan
<input type="checkbox"/>	Comprehensive Plan Amendment
	<input type="checkbox"/> Text Amendment <input type="checkbox"/> Future Land Use Map Amendment
	<input type="checkbox"/> Small Area Plan Map Amendment
<input type="checkbox"/>	UDO Text Amendment – UDO Section:

<b>PROJECT INFORMATION</b>	
<a href="https://www.hollyspringsnc.gov/742/Maps">https://www.hollyspringsnc.gov/742/Maps</a>	
Project Name	
Project Location Use street address. If none, use closest intersection	<input type="checkbox"/> Within Corporate Limits <input type="checkbox"/> Within Holly Springs ETJ <input type="checkbox"/> Pending Annexation
PIN(s)	
Real Estate ID	
Project Acreage	Partial Parcel? Yes No
Current Zoning	
Proposed Zoning	
Current Future Land Use Designation	
Proposed Future Land Use Designation	
Small Area Plan Designation (if applicable)	
Special Study Scoping Meeting Dates	
Sketch Plan Review (pre-submittal) Meeting Date:	
Neighborhood Meeting Date:	

<b>CERTIFICATE OF COMPLETION</b>	
I certify that all information presented in this petition is accurate to the best of my knowledge and belief.	
Signature of Applicant:	Date:



# REZONING PETITION

Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## SUBMITTAL CHECKLIST: ZONING MAP CHANGE – GENERAL USE DISTRICT

A copy of this checklist and the following items must be submitted with the Rezoning Petition to be deemed a complete submittal:

Initial or N/A	Requirement
	Complete Petition Form. Applicant, all design professionals and financially responsible party must be completed.
	Vicinity Map
	Owner Affidavit
	Affidavit of Owner Notification <i>Required if Applicant is not the property owner</i>
	Property Survey including legal description ( <i>required only if the request does not include the entire tax parcel</i> ) in PDF and WORD format.
	Plan Consistency Statement
	Neighborhood Meeting report
	Statement of Comprehensive Plan – Future Land Use Plan Compatibility <i>If the proposed Zone Map Change is inconsistent with the Future Land Use designation of the property</i>
	<a href="#">Certificate of Plan Revisions</a> if submitting a revision to approved plans

~ The remainder of this page is intentionally left blank ~



## **SUBMITTAL CHECKLIST: ZONING MAP CHANGE: CONDITIONAL ZONING DISTRICT**

A copy of this checklist and the following items must be submitted with both Option 1 and Option 2 Petitions for the Zoning Map Change to a Conditional Zoning District to be deemed a complete submittal:

<b>Initial or N/A</b>	<b>Requirement</b>
	<b>OPTION 1 Plan:</b> Development Plan or Subdivision Plan (Preliminary Plat) <ul style="list-style-type: none"><li>• Public Benefits Statement</li><li>• <a href="#">Development Petition</a> with Development Plan or Subdivision Plan submitted to the Portal under a separate Application.</li></ul>
	<b>OPTION 2 Plan:</b> Master Plan <ul style="list-style-type: none"><li>• Master Plan</li></ul>
	Complete Petition Form. Applicant, all design professionals and financially responsible party must be completed.
	Vicinity Map
	Owner Affidavit
	Affidavit of Owner Notification <i>Required if Applicant is not the property owner</i>
	Property Survey including legal description ( <i>required only if the request does not include the entire tax parcel</i> ) in PDF and WORD format.
	Plan Consistency Statement
	Statement of Comprehensive Plan – Future Land Use Plan Compatibility <i>If the proposed Zone Map Change is inconsistent with the Future Land Use designation of the property</i>
	Neighborhood Meeting Report
	Design Goals Narrative
	Design Manual
	List of additional special limitations and/or conditions ( <i>if applicable</i> )
	<a href="#">Wake County Residential Development Notification Form</a> <i>Only for projects proposing residential dwelling units</i>
	<a href="#">Certificate of Plan Revisions</a> if submitting a revision to approved plans



**SUBMITTAL CHECKLIST: COMPREHENSIVE PLAN AMENDMENT**

A copy of this checklist and the following items must be submitted with the Rezoning Petition to be deemed a complete submittal:

<b>Initial or N/A</b>	<b>Requirement</b>
	Complete Petition Form. Applicant, all design professionals and financially responsible party must be completed.
	Vicinity Map
	Statement of Comprehensive Plan Future Land Use Plan Compatibility
	Owner Affidavit
	Property Survey including legal description (required only if the request does not include the entire tax parcel) in PDF and WORD format.
	<a href="#"><u>Certificate of Plan Revisions</u></a> if submitting a revision to approved plans

~ The remainder of this page is intentionally left blank ~



# REZONING PETITION

Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## SUBMITTAL CHECKLIST: UDO TEXT AMENDMENT

A copy of this checklist and the following items must be submitted with the Rezoning Petition to be deemed a complete submittal:

Initial or N/A	Requirement
	Complete Petition Form. Applicant, all design professionals and financially responsible party must be completed.
	Statement of Justification including: <ul style="list-style-type: none"><li>• Existing UDO Language</li><li>• Proposed UDO Language*</li><li>• Plan Consistency Statement</li></ul>

\***BOLD** additions to the text and ~~strikethrough~~ text to be removed.

~ The remainder of this page is intentionally left blank ~



# REZONING PETITION

Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## 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 use additional sheets as needed.**

### PLAN CONSISTENCY STATEMENT

In accordance with NCGS §160D-605 when adopting or rejecting any Zoning Map Amendment or UDO Text Amendment, the Town Council must approve a brief statement describing whether its action is consistent or inconsistent with an adopted comprehensive or land-use plan. In addition, a statement analyzing the reasonableness of a proposed Zoning Map Amendment shall be approved by the Town Council. This statement of reasonableness may consider, among other factors:

- The size, physical conditions, and other attributes of the area proposed to be rezoned
- The benefits and detriments to the landowners, the neighbors, and the surrounding community
- The relationship between the current actual and permissible development on the tract and adjoining areas and the development that would be permissible under the proposed amendment
- Why the action taken is in the public interest
- Any changed conditions warranting the amendment.

Please provide detailed documentation to assist the Council in making their determination.

### EXECUTIVE SUMMARY

### SECTION 1: LAND USE & CHARACTER

### SECTION 2: COMPREHENSIVE TRANSPORTATION PLAN

### SECTION 3: PARKS, RECREATION



# REZONING PETITION

Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## SECTION 4: COMMUNITY FACILITIES

## SECTION 5: INFRASTRUCTURE & UTILITIES

## SECTION 8: NATURAL RESOURCES

## STATEMENT OF REASONABILITY

## PUBLIC BENEFITS STATEMENT

A written statement that demonstrates how the proposed Project provides sufficient benefits to the general public. Public benefit may include:

1. Infrastructure improvements such as improvements to existing Streets, intersections, medians, Sidewalks, greenways, sidepaths, pedestrian crossings, and public utilities.
2. Publicly accessible Open Space such as Parks and Playgrounds, dog parks, Urban Civic Spaces, Plazas, Squares, public art, and similar outdoor amenities.
3. Sustainable design and/or architecture such as adaptive reuse of existing buildings, preservation of significant on-site environmental features, on-site renewable energy generation, compliance with established standards such as Leadership in Energy and Environmental Design (LEED), Energy Star, Earthcraft, etc., or other actions that further sustainability of the project.
4. Additional public benefits not listed above may be considered by the decision-making body.



# REZONING PETITION

Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## NEIGHBORHOOD MEETING REPORT

A Neighborhood Meeting is required to occur prior to your submittal. The requirements for this meeting can be found in section 11.5 of the [Unified Development Ordinance \(UDO\)](#). The Neighborhood Meeting shall take place no more than 12 weeks prior to the application date and can be held virtually. A copy of the Neighborhood Meeting Notice must be sent to [DSIntake@hollyspringsnc.gov](mailto:DSIntake@hollyspringsnc.gov) prior to mailing for review and approval along with a copy of the mailing list.

### Notification of Owners:

1. The Petitioner (or 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 within a 500' radius of the subject property. Mailing notices shall include surrounding property owners and property owner's association (or equivalent), and the Town of Holly Springs (Attn: Development Services). Where the tax records reflect a mailing address for an owner of property to be different than the address of the property owned, notification shall also be mailed to all addresses of the property itself, including apartment or suite addresses.
2. The notice shall include the date, time and location of the Neighborhood Meeting, the name of the Petitioner and 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 mailed not less than ten (10) days nor more than twenty-five (25) days before the date of the Neighborhood Meeting.

NEIGHBORHOOD MEETING INFORMATION	
Meeting Date:	
Meeting Time:	
Meeting Location:	
<b>CONDUCT OF MEETINGS</b> (Attach additional sheets if needed) 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.	
<b>Summary of Issues:</b>	
<b>Changes made to the Petition as a result of the meeting:</b>	
<b>Additional attachments required:</b> <ul style="list-style-type: none"><li>• A listing of those persons and organizations that were sent notification about the Neighborhood Meeting.</li><li>• A copy of the signed attendance list that includes the names and addresses of those in attendance.</li><li>• A copy of the mailed notice.</li></ul>	
<b>Preparer's Signature:</b>	Date:

## NOTIFICATION 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 No.: \_\_\_\_\_

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

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

Existing Zoning District: \_\_\_\_\_

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  
Planning Division at (919)557-3111 or email DSIntake@hollyspringsnc.gov.

Thank you,

---

Applicant Signature

---

Date

Applicant Printed Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_



**REZONING PETITION**  
Rezoning, Comprehensive Plan Amendment, UDO Amendment  
DPM Appendix #A.02 Supplement 20 September 2024

## **AFFIDAVIT OF OWNER'S CONSENT**

Before me personally appeared \_\_\_\_\_ who, being duly sworn, hereby proclaims that they are the owner of the property legally described as the specified Wake County Parcel Identification Number(s) listed below:


and does hereby authorize \_\_\_\_\_ to act  
(name of representative/applicant)

on their behalf as their agent with regard to the processing of said Development Project.

---

Signature of Owner

<Print Name>

<Entity Name>

<Address>

<City, State Zip>

Sworn to or affirmed and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

NOTARY PUBLIC:

---

Official Signature of Notary

(Official Seal)

\_\_\_\_\_, Notary Public  
Print Name

My commission expires: \_\_\_\_\_



## REZONING PETITION

## **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 the property(s) they do not own at the time of the petition submission.

This 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).

## AFFIDAVIT

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.

Signature of Applicant

<Print Name>

<Entity Name>

<Address>

<City, State Zip>

Sworn to or affirmed and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**NOTARY PUBLIC:**

(Official Seal)

Official Signature of Notary

\_\_\_\_\_, Notary Public  
Print Name

My commission expires: \_\_\_\_\_