

**I. REZONING APPLICATION  
CITY OF CHARLOTTE**

Petition #:	_____
Date Filed:	_____
Received By:	_____

**Complete All Fields (Use additional pages if needed)**

Property Owner: 2301 Distribution LLC

Owner's Address: 610 E Morehead Street, Suite 100 City, State, Zip: Charlotte, NC 28202

Date Property Acquired: 6/15/2018

Property Address: 2301 Distribution Street

Tax Parcel Number(s): 121-042-01

Current Land Use: Industrial Size (Acres): +/- 1 acre

Existing Zoning: TOD-M(O) Proposed Zoning: TOD-NC

Overlay: None Tree Survey Provided: Yes:     N/A: x

Required Rezoning Pre-Application Meeting\* with: Claire Lyte-Graham, Travis Johnson, Dave Pettine, Dave Meacci, Laura Harmon

Date of meeting: 1/29/2020

(\*Rezoning applications will not be processed until a required pre-application meeting with a rezoning team is held.)

<b>For Conditional Rezonings Only:</b>
Requesting a vesting period exceeding the 2 year minimum? Yes/No. Number of years (maximum of 5): <u>n/a</u>
Purpose/description of Conditional Zoning Plan: <u>n/a</u>
_____
_____

**Collin Brown & Brittany Lins**  
Name of Rezoning Agent

**1420 E. 7<sup>th</sup> Street, Suite 100**  
Agent's Address

**Charlotte, NC 28204**  
City, State, Zip

**704-200-2637**  
Telephone Number Fax Number

**Collin.Brown@alexanderricks.com /  
Brittany.Lins@alexanderricks.com**  
E-Mail Address

  
Signature of Property Owner  
George S. Dewey, IV

**President & CEO of Aston Properties, Inc., Manager of**  
(Name Typed / Printed) 2301 Distribution, LLC

**JACo Acquisition, LLC**  
Name of Petitioner(s)

**601 Thirteenth Street NW, Suite 300 North**  
Address of Petitioner(s)

**Washington, DC 20005**  
City, State, Zip

**202-207-3918**  
Telephone Number Fax Number

**mgill@akridge.com**  
E-Mail Address

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
(Name Typed / Printed)

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MICHAEL GILL (SVP)  
(Name Typed / Printed)