

UDO CHANGE REQUEST FORM

DATE SUBMITTED	
REFERENCE TO COD	E / SECTION:
REQUESTOR:	
NAME	
TITLE	
COMPANY	
EMAIL ADDRESS	
PHONE	
SITE TYPE: This is a	single site issue. This is a multiple site issue.
CITY OF CHARLOTTI	E DEPARTMENTS AFFECTED:
Clarification (Inform	nal) Interpretation Text Amendment

PRESENT A SHORT DESCRIPTION OF ISSUE: List the general topic, and then a short narration of the specific issue (Additional plea, evidence, reasoning, and documentation should be attached as a separate form.)								
		L ANATION OF NE n of the specific l		T/BENEFITS OF	MODIFICATION			

SUGGESTED SOLUTION/REVISION: Clarify how the issue(s) may be impacting the industry and the possible negative impact on the Cit Charlotte and their residents.	ty of
LIST OF SUPPORTING DOCUMENTS ATTACHED:	
COMPLETED FORMS SHOULD BE SENT TO:	
Laura Harmon with the City of Charlotte Planning Department at laura.harmon@charlottenc.gov	

Please CC: shannon.frye@charlottenc.gov solomon.fortune@charlottenc.gov

rob.nanfelt@rebic.com