

Application for Conditional Rezoning

Union County
Planning Department
500 N Main Street - Suite 70
Monroe, NC 28112
T 704.283.3565
E UCPlanning@unioncountync.gov

General Information

Project Address 0 Camden Road City Marshville State NC Zip 28103

Tax Parcel ID 02226017 Current Zoning Designation RA-40 Total Acres 12.21

Proposed Zoning Designation RA-40 (CD) Date Submitted 2/18/2026

Contact Information

Applicant Name Steve Merritt (His Perfect Love Ministries Inc)

Address PO Box 516 City Marshville State NC Zip 28111

Phone 704-622-6030 Fax _____ Email _____

Property Owner Name Steve Merritt (His Perfect Love Ministries Inc)

Address PO Box 516 City Marshville State NC Zip 28111

Phone 704-622-6030 Fax _____ Email _____

Applicant's Certification

Signature

Date

Printed Name/Title

CHAIRMAN OF BOARD

Owner's Certification (include names and signatures of all owners)

Signature

Date

Printed Name/Title

CHAIRMAN OF BOARD

Union County Office Use Only:

Case Number: _____ Date Received: _____

Amount of Fee: _____ Fee Ok: _____ Received by: _____

Contact Bjorn Hansen to begin the process. T. 704.283.2690 E. Bjorn.hansen@unioncountync.gov

