Town of Sharpsburg Zoning Compliance Permit/Application

DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# APPLICANT

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS OF PROPERTY**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BUSINESS NAME (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PROPERTY OWNER (if different from applicant):**

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONTRACTOR:**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STATE LICENSE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICATION FOR**: \_\_\_\_\_\_\_CONSTRUCTION OF A BUILDING \_\_\_\_\_CHANGE OF USE \_\_\_\_\_BUILDING ALTERATION

\_\_\_\_\_ MANUFACTURED HOME \_\_\_\_\_ TEMPORARY USE or EVENT \_\_\_\_\_ OTHER

## DESCRIPTION OF PROPOSED WORK, PROJECT, ACTIVITIES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**DESCRIPTION OF PROPERTY: ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TAX MAP ID or PIN#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IS PROPERTY IN A 100-YEAR FLOODPLAIN: \_\_\_\_YES \_\_\_\_NO

LOT DIMENSIONS (As Apply): STRUCTURE DIMENSIONS:

 Length \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Width \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Width \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Height \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 Is this a corner lot? \_\_ YES \_\_ NO Accessory Structure\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF USE: \_\_ SINGLE FAMILY RESIDENTIAL \_\_ INDUSTRIAL

 \_\_ MULTI-FAMILY RESIDENTIAL \_\_ ACCESSORY

 \_\_ COMMERCIAL \_\_ INSTITUTIONAL

EXISTING STRUCTURES ON PROPERTY: \_\_ VACANT LOT (No Buildings or Manufactured Homes on Property)

 \_\_ SITE-BUILT or MODULAR HOME

 \_\_ MANUFACTURED HOME

 \_\_ COMMERCIAL OR INDUSTRIAL BUILDING

\_\_ ACCESSORY BUILDING or STRUCTURE (Including Detached Carports, Garages, Storage Buildings, pool, fence)

UTILITY SERVICE: \_\_ TOWN WATER \_\_ SEPTIC TANK \_\_ WELL

 \_\_ TOWN SEWER \_\_ TOWN ELECTRIC \_\_ DUKE ELEC

## DESCRIPTION OF ZONING

**ZONING DISTRICT**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ **IN TOWN LIMITS** \_\_ **EXTRATERRITORIAL JURISDICTION**

**BUILDING SETBACKS**: **REQUIRED MINIMUM** **PROPOSED**

 Front yard \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

 Rear yard

 Side yard, left \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

 Side yard, right \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

 Side yard, corner \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

 Maximum lot coverage \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

**COMMENTS:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUIRED ATTACHMENTS:**

1. A site plan DRAWN TO SCALE that shows THE LOCATION OF all EXISTING AND PROPOSED BUILDINGS, ADDITIONS, FencinG, PARKING layout AND LOADING ZONeS, DRIVEWAYS, WATER AND SEWER LINES, WATER AND SEWER SERVICE METERS, setbacks from the property lines/right-of-ways. sHOW all building dimensions, tree plantings and buffer yards, fences, AND other site elements.
2. For all new construction of primary buildings, a copy of the recorded plat/survey will need to be attached to this application. A copy of this can be obtained from the Register of Deeds office.
3. Driveway Permit Application for new or modified driveways.
4. Additional site plan requirements and permit applications may apply depending on the type of project (contact Planning Department)
5. Application fee: $\_\_\_\_\_\_\_\_\_\_\_\_

**NOTES:**

1. Except for authorized Temporary Use or Event having specified time limits, an approved Zoning Compliance/Application shall expire and be cancelled unless the work authorized by it shall have begun within twelve (12) months of its issued date, or if the work authorized by it is suspended or abandoned for a period of one year, unless vested rights is requested and approved for longer periods in accordance with NCGS 160D-108.
2. The Planning Department must be notified to make on-site inspections once the setback lines have been identified on site (for new construction.)
3. The Planning Department will attempt to make zoning determinations within four (4) business days of submission of a fully completed application.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OWNER/APPLICANT STATEMENT:** I certify that I am the property owner or truly represent the property owner(s). I certify that the foregoing statements are accurate correct to the best of my knowledge. I understand that the Town of Sharpsburg is not bound by oral or written assertions or representations of its staff members. I agree to conform to all Town of Sharpsburg Ordinances and Laws of the State of North Carolina regulating such work and any plans or specifications submitted. Any violation of the Zoning Ordinances will be grounds for revoking this permit and any other permits issued in reliance upon the same and subject the violator to penalties, civil citations, and/or other enforcement actions provided by the Zoning Ordinance.

**APPLICANT** (*PRINT NAME/SIGN*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE:\_\_\_\_\_\_\_\_\_\_\_

**OWNER or AUTHORIZED AGENT**

(*PRINT NAME/SIGN*):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE:\_\_\_\_\_\_\_\_\_\_\_

**APPROVED \_\_\_ DISAPPROVED \_\_\_**

**BY ZONING OFFICIAL SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMMENTS/CONDITIONS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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