

TOWN OF ARCHER LODGE

ZONING PERMIT APPLICATION

OFFICIAL USE: Permit # _____ Date Filed: _____ Fee _____ Zoning District _____
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1. New Construction _____ Demolition _____ Improvement _____ Other _____

2. Proposed building and dimensions, activity or use _____

3. Property Owner: _____ Phone: _____

Email: _____ Address: _____

4. Applicant/Agent _____ Phone: _____

Email: _____ Address: _____

6. Site Address: _____ Subdivision: _____

7. Site PIN# _____ Tax Record # _____ Lot/tract size _____

8. Utilities: County Water: _____ Well: _____ County Sewer: _____ Septic: _____

9. Building Setback Requirements **ATTACH Plot Plan showing building and setbacks**

Minimum: Front Yard _____ Side Yard _____ Rear Yard _____ Corner Lot Side Yard _____

10. Other permits: NCDOT driveway _____ Watershed: _____ Stormwater: _____

Riparian Buffer _____ Erosion Control _____ Flood Elevation Certification: _____

11. Special Permits or Requirements (if Applicable)

Special Use: _____ Council Approval Date: _____

Conditional Use: _____ Board of Adjustment Approval Date: _____

Variance Issued: _____ Board of Adjustment Approval Date: _____

12. Applicants Certification: I certify that all of the statements made in this application and any attached documentation are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may result in the rejection of this permit or subsequent revocation of this permit. Authorized town officials are granted right of entry to make evaluations or inspections as to compliance and to release information upon public request. I understand that additional State and County permits may be required prior to occupancy of requested use. I further understand that a Certificate of Compliance shall be required and issued by the Town of Archer Lodge prior to the occupancy and/or commencement of operations of the proposed use.

Signature of Applicant/Owner/Agent

Date: _____

This permit is issued pursuant to information contained herein and provided by the owner and/or agent. Information determined to be false or failure to comply with all appropriate Statutes, Codes, and Regulations may result in the immediate revocation of this permit.

OFFICIAL USE ONLY

Special Requirements/Conditions: _____

Signature of Town Official (Date: _____) (Approval _____ Conditional approval _____ Denial _____)