



# Town of North Wilkesboro

## Special Use Permit Application

I, (We) the undersigned, do hereby respectfully make application to the Board of Adjustment of the Town of North Wilkesboro to request a special use permit as hereinafter requested, and in support of this application, the following facts are shown:

Name of Project: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Address of Project: \_\_\_\_\_

Property Tax Parcel Number: \_\_\_\_\_

Applicants Legal Interest in the Property: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Mailing Address: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Contact Fax #: \_\_\_\_\_

Contact Cell Phone #: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_

Property Owner Phone #: \_\_\_\_\_

Please comment on the following statements:

- Will not endanger the public health or safety,
- Will not materially injure the value of adjoining or abutting property,
- Will be in harmony with the area in which it is located, and
- Will be in conformity with the land-use plan, thoroughfare plan, or other plan officially adopted by the Town Board.

**Applicant must submit the following items with the application:**

1. \$100 application fee
2. A copy of the Deed for the property.
3. List of neighboring property owners (Owner Name and Mailing Address including the Physical Address) whose property is located within 150 feet of the lot that is the subject of this application
4. An accurate boundary survey and site plan created by a professional land surveyor or professional engineer;
  - a. Adjoining property owner names, land uses, and zoning districts
  - b. The size of the subject property
  - c. All property lines (with dimensions identified)
  - d. Adjoining public street right-of-ways, private streets, pavements widths, and future thoroughfare right-of-ways
  - e. Location of all existing and proposed improvements (driveways, drive isles, roads, etc.) and structures (including number of stories and gross floor area, fencing, etc.)
  - f. All existing and proposed parking areas including the total number of spaces (where the subject use is to share a common parking area with other existing or future uses indicate the allocation of spaces devoted or reserved to each separate use)
  - g. Topographical features (streams, ditches, etc.), required buffers, floodways and 100-year floodplains, and minimum building lines and lot widths
  - h. Stormwater drainage plan, water and sewer plan, erosion control plan, landscape plan including shading, and utility plan
  - i. Location of existing and proposed easements
  - j. Location of fire hydrants
  - k. Written addendum of phasing plan, detailing all work necessary to complete each phase, time schedule, etc.
  - l. North arrow, legend, scale, and date of map
  - m. Name of property owner
  - n. Name of person or firm preparing the map
5. Submit the following copies of the boundary survey and site plan with the application;
  - a. One (1) copy (not less than 24" x 36") for staff review
6. Submit the following copies of the boundary survey and site plan after staff review;
  - a. Three (3) copies (not less than 24" x 36") for Town Board
  - b. Fifteen (15) copies (11" x 17") Board of Adjustment

Completed requests must be filed with the Planning Office no later than twenty (20) working days prior to the meeting date in order to be placed on the monthly agenda. The Board of Adjustment meeting is held regularly on the second Thursday night of each month at 6:00 p.m. For additional information or assistance, call the Town of North Wilkesboro Planning Office at 667-7129.

SUP #: \_\_\_\_\_

Date Received: \_\_\_\_\_

Receipt #: \_\_\_\_\_

**OWNER STATEMENT**

I (We), \_\_\_\_\_, \_\_\_\_\_

being the Owner(s) understand that failure to address any item in these requirements may result in the request not meeting the minimum submission requirements and will be returned to me for revision and resubmission at the next regular review cycle.

Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: AGENT ACTING ON BEHALF OF PROPERTY OWNERS MUST HAVE A NOTARIZED STATEMENT FROM THE PROPERTY OWNER GIVING THEM THE AUTHORITY TO ACT ON THE OWNERS BEHALF.**

I (We), \_\_\_\_\_, \_\_\_\_\_

being the Owner(s) of the property described herein, do hereby authorize

\_\_\_\_\_, as my agent for purposes of this application.

Agent Signature \_\_\_\_\_ Date \_\_\_\_\_

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public \_\_\_\_\_

My Commission Expires:

\_\_\_\_\_