

Map #:		Permit #:	
Parcel #:Lot #:		Fee: \$	Receipt #
Zoning District			
Granite Quarry Town Hall, 143 N. Salisbury Avenue, Granite Quarry, NC 28146 - Telephone: (704) 279-5596			
Zoning Compliance Permit			
Water / Sewer Service: [ ] Existing [ ] to be in	stalled [ ] N/A Utility Location	n #:	
Site Address: Lanc	Area (ac. or sq. ft.): Sub-di	ivision Name (	if applicable):
Property Owner: Address:			
Permit Applicant Name:			
Address:	City:	State:	Zip:
Property located in a flood plane: Yes [ ] or No [ ] FIRM Panel (Town Staff to Complete if Required) —  Applicant must contact Granite Quarry Planning Department for review of Flood Plane regardless of property location.			
Storm Water review or permit required: Yes [			31 1 7
PROJECT INFORMATION			
Type of Project Proposed (mark all that app	oly):   Proposed Use of Property	□ New Resi	dential Development and/or
Construction (attach site plan) ☐ New Non-residential Development or Construction (attach site plan) ☐ New "Use"			
of Existing Structure/property ☐ New Accessory Structure/Use ☐ New Sign ☐ Subdivision Plat ☐ Exemption Plat  Description(s) of Use: and/or Project (activities proposed as related to each box checked above):			
Description(s) of <b>ose</b> .	and/or Froject (activities	s proposea as rei	atea to each box checked above).
Area (Sq. Ft.): Heated:	Unheated:	Ot	her:
<b>ZONING INFORMATION</b> (All applicable provisions of the Granite Quarry Development Ordinance apply.)			
□ Zoning District:	Notes	Required Se	T .
☐ Overlay/Watershed District (if applicable):		Front:	Front:
☐ Site Development Plan (attach draft):		Left Side:	Left Side:
☐ Floodplain (if applicable) BFE:	FIRM Panel #	Right Side:	Right Side:
☐ Stormwater (if applicable):	20,000+ sq.ft. impervious area	Rear:	Rear:
□ Other:			
			<u> </u>
REMINDERS: 1) All land disturbing activity r		•	
sediment, prevent off-site impacts, and stal			-
lot the building or sign will be placed. Provid			
height, and area in square feet, all lot dime	nsions, front yard, side yard(s), red	ar yard, etc. (A	Attach additional sheet(s) to
this form.)			
Applicant's Printed Name:	Signature of the Applica	int:	
By signing this document I assure all information provided by me is true and accurate. Date:, 20			
FOR OFFICIAL USE ONLY BELOW THIS LINE			
Permit: ☐ Approved ☐ Denied ☐ Appe	aled		
Signature of Planning, Zoning & Subdivision			Date: , 20
Permit Expiration Date: . 20 unless work is commenced in accordance with GQDO.			