



Town of Forest City

Inspections and Zoning Department
 128 N Powell St, PO Box 728
 Forest City, North Carolina 28043
 fcbuilding@townofforestcity.com

Zoning Permit Application – Please fill out completely or the application will not be processed.

Note: A fee of \$100.00 will be required to accompany this application.

		Permit #:	Receipt #:
1. Application Type			
<u>Land Use</u>	✓	Addition	<input type="checkbox"/>
Single-Family Residential	<input type="checkbox"/>	Upfit (no expansion)	<input type="checkbox"/>
Multi-Family Residential	<input type="checkbox"/>	Accessory Structure	<input type="checkbox"/>
Non-residential	<input type="checkbox"/>	Change of Use	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	Home Occupation	<input type="checkbox"/>
		Temporary Use	<input type="checkbox"/>
		Fence	<input type="checkbox"/>
Notes: _____		Zoning Review Fee	<input type="checkbox"/>
_____		Other _____	<input type="checkbox"/>
		Fee Total _____	
<u>Permit Type</u>	✓	Fee	
New Construction	<input type="checkbox"/>		

2. Project Information

Property Address _____

Tax Parcel Number(s) _____ Current Use _____ Proposed Use _____

Property Size (acres) _____ Heated Area (square feet) _____ Unheated Area (square feet) _____ Height _____

Total proposed impervious area (including all buildings, driveways, sidewalks, etc.) _____ (square feet)

Is this property in a Floodplain? Yes No If yes, please complete Floodplain Development Permit application.

Is this property on public sewer? Yes No If no, please show septic location on site plan.

Are there trees more than 8" caliper? Yes No If yes, please show location and tree species on site plan.

3. Contact Information

_____ Property Owner _____ Address _____ City, State, Zip _____ Telephone _____ E-mail _____	_____ Applicant _____ Address _____ City, State, Zip _____ Telephone _____ Fax _____ Signature _____ Print Name _____ Date _____
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Staff Use Only:

Zoning District: _____ Overlay District(s): _____

Setbacks:

Front: _____ Rear: _____ Use Permitted? Yes No

Right Side: _____ Left Side: _____ Special Requirements? Yes No Section _____

Permit Approved? Yes No Zoning Administrator Signature _____ Date _____

Notes: _____