

ALL YELLOW AREAS MUST BE COMPLETED **CITY OF CHARLOTTE**
APPLICATION FOR ZONING USE PERMIT

PRESS FIRMLY

L O C A T I O N / O W N E R	STREET # (N,S,E,W) STREET NAME (AV,RD,ST, etc)			PERMIT #		
	SUITE/UNIT(S): TAX PARCEL #			PROJECT #		
	PROPERTY OWNER ADDRESS					
	CITY STATE ZIP PHONE #					
Z O N I N G	APPLICANT'S NAME / CONTRACTOR ADDRESS					
	CITY STATE ZIP PHONE #					
	CONTRACTOR ACCOUNT # PLACARD ISSUED: <input type="checkbox"/> No <input type="checkbox"/> Yes			TOTAL FEE \$		
	PREVIOUS USE INTENDED USE					
I N T E N D E D U S E	BUSINESS NAME					
	ZONING: BUILDING DIMENSIONS: WIDTH x DEPTH HEIGHT					
	MINIMUM SETBACKS: FRONT LEFT SIDE RIGHT SIDE REAR REQ. PARK'G					
	LAND AREA / ACRAGE (sq. ft.) SWIM BUFFER: <input type="checkbox"/> No <input type="checkbox"/> Yes HOLD REQUIRED: <input type="checkbox"/> No <input type="checkbox"/> Yes					
WATERSHED: <input type="checkbox"/> No <input type="checkbox"/> Yes SURVEY REQUIRED: <input type="checkbox"/> No <input type="checkbox"/> Yes TREE SAVE: <input type="checkbox"/> No <input type="checkbox"/> Yes						
REMARKS / CODE SECTION:						
<div style="text-align: center;">PERMITTED INTENDED USE</div> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> ABC INSPECTION - USE _____ ABC INSPECTION - FOR RESTAURANT USE ACCESSORY STRUCTURE (15.6) _____ (MUST ADD DIMENSIONS ABOVE) ADULT CARE HOME ADULT ELECTRONIC GAMING ESTABLISHMENT ALTERNATIVE CORRECTIONAL FACILITY AUCTION / ARTS & CRAFTS / FAIRS / PLANT SALES/ FLEA MARKETS / RUMMAGE SALES BED& BREAKFAST CHILD CARE CENTER IN RESIDENCE (6-12 CHILDREN) - (15.6 C) FAMILY CHILDCARE HOME (1-8 CHILDREN) - (15.6 B) GROUP HOME - (15.4 - UU) LANDFILL AND CLEARING & INERT DEBRIS - (15.3 BBB) LAND USE </td> <td style="width:50%; vertical-align: top;"> MOBILE CAR WASH(TEMPORARY - UP TO 90 DAYS) MOBILE FARMER'S MARKET MOBILE FOOD VENDOR - (15.5 B) MOBILE RETAILVENDOR - (15.5 C) OUTDOOR ENTERTAINMENT (100 FT SEPARATION FROM N1 PLACE TYPE) PRIVATE STABLES - (15.5 L) ROOMING HOUSE - (15.5 M) SALES ASSOCIATED WITH A HOLIDAY TEMPORARY CONSTRUCTION TRAILER TEMPORARY CONTRACTOR'S OFFICE / CONTRACTOR'S YARD (15.5 E) TEMPORARY OUTDOOR ENTERTAINMENT - (15.5 F) TEMP. OUTDOOR SALES (14 DAYS CONSIGNMENT) - (15.5 C) TEMPORARY OUTDOOR SALES (UP TO 90 DAYS) - (15.5 G) TEMPORARY OUTDOOR STORAGE CONTAINER - (15.5 H) OTHER _____ </td> </tr> </table>					<input type="checkbox"/> ABC INSPECTION - USE _____ ABC INSPECTION - FOR RESTAURANT USE ACCESSORY STRUCTURE (15.6) _____ (MUST ADD DIMENSIONS ABOVE) ADULT CARE HOME ADULT ELECTRONIC GAMING ESTABLISHMENT ALTERNATIVE CORRECTIONAL FACILITY AUCTION / ARTS & CRAFTS / FAIRS / PLANT SALES/ FLEA MARKETS / RUMMAGE SALES BED& BREAKFAST CHILD CARE CENTER IN RESIDENCE (6-12 CHILDREN) - (15.6 C) FAMILY CHILDCARE HOME (1-8 CHILDREN) - (15.6 B) GROUP HOME - (15.4 - UU) LANDFILL AND CLEARING & INERT DEBRIS - (15.3 BBB) LAND USE	MOBILE CAR WASH(TEMPORARY - UP TO 90 DAYS) MOBILE FARMER'S MARKET MOBILE FOOD VENDOR - (15.5 B) MOBILE RETAILVENDOR - (15.5 C) OUTDOOR ENTERTAINMENT (100 FT SEPARATION FROM N1 PLACE TYPE) PRIVATE STABLES - (15.5 L) ROOMING HOUSE - (15.5 M) SALES ASSOCIATED WITH A HOLIDAY TEMPORARY CONSTRUCTION TRAILER TEMPORARY CONTRACTOR'S OFFICE / CONTRACTOR'S YARD (15.5 E) TEMPORARY OUTDOOR ENTERTAINMENT - (15.5 F) TEMP. OUTDOOR SALES (14 DAYS CONSIGNMENT) - (15.5 C) TEMPORARY OUTDOOR SALES (UP TO 90 DAYS) - (15.5 G) TEMPORARY OUTDOOR STORAGE CONTAINER - (15.5 H) OTHER _____
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THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS REGULATING THE WORK.

APPROVAL MAY BE REQUIRED FROM OTHER AGENCIES PRIOR TO ISSUING A PERMIT. THIS PERMIT WILL EXPIRE IF WORK HAS NOT STARTED AND INSPECTED WITHIN 6 MONTHS, OR IF WORK HAS BEEN DISCONTINUED FOR A PERIOD OF 12 MONTHS. A SEPARATE PERMIT WILL BE REQUIRED FOR SIGNS ERECTED, IF APPLICABLE. NO REFUNDS WILL BE PROCESSED AFTER ISSUANCE OF THIS PERMIT.

APPLICANT'S SIGNATURE	DATE	PRINT APPLICANT'S NAME
Make checks payable to: CITY OF CHARLOTTE C/O Planning - Zoning & Permitting Division 2145 Suttle Avenue Charlotte, NC 28208		
METHOD OF PAYMENT <input type="checkbox"/> CARD /CHECK <input type="checkbox"/> ACCOUNT		
		APPROVED BY / DATE
		EMERALD RQ # _____

ORIGINAL-White INSPECTOR-Blue CUSTOMER-Yellow



RESIDENTIAL ACCESSORY STRUCTURE OR ACCESSORY DWELLING UNIT (ADU) DECLARATION

(Only required if proposed project is an accessory structure or an ADU – Please Print)

DEFINITIONS

1. Accessory Structure. A structure located on the same lot as the principal building that is incidental and subordinate to the function of the principal building.
2. Dwelling - Accessory Unit (ADU). An additional dwelling unit associated with and incidental to a principal dwelling. An accessory dwelling unit (ADU) shall include separate cooking and sanitary facilities and is a complete, separate dwelling unit. The ADU may be within or attached to the principal dwelling unit or within a detached accessory structure, such as a garage. ADUs are not permitted in recreational vehicles, travel trailers, campers, or any other type of motor vehicle.
3. Dwelling Unit. A single unit providing complete, independent living facilities for no more than one family, including permanent provisions for living, sleeping, eating, cooking, and sanitation.

STANDARDS

Accessory structures that ARE NOT accessory dwelling units (ADU) must comply with the requirements of **Article 17.1** of the City of Charlotte Unified Development Ordinance.

Accessory structures that ARE accessory dwelling units (ADU) must also comply with the requirements of **Article 15.6** and **Article 17.1.D and F** of the City of Charlotte Unified Development Ordinance. – Please see below.

Dwellings, Accessory Units (ADU) shall be permitted as an accessory to any single family dwelling unit and duplex dwelling in accordance with the following requirements:

1. The ADU shall be clearly subordinate to the principal residential use.
2. An ADU is permitted as follows:
 - a. In conjunction with a single-family dwelling in any zoning district.
 - b. In conjunction with a duplex dwelling in any zoning district when each unit of the duplex is not located on a subplot.
3. Only one ADU shall be permitted on the lot.
4. The ADU and its associated principal dwelling shall be under the same ownership.
5. The ADU shall not be served by a driveway separate from that serving the principal dwelling. However, if the ADU is within an accessory structure and located on a corner lot or a lot that abuts an alley, a separate driveway may be provided from the side street or the alley, whichever applies.
6. An ADU located within the principal dwelling shall comply with the following additional requirements:
 - a. The ADU shall have a total floor area no greater than 40% of the total floor area of the principal residential use.
 - b. The ADU shall not be internally accessible from the principal residential use. **** This condition creates a two-family dwelling that must also comply with the NC Residential Code, including fire separation and fire-rated construction.**
7. An ADU located within an accessory structure shall comply with the following additional requirements:
 - a. The ADU shall have a total floor area no greater than 50% of the total floor area of the principal residential use.
 - b. The structure shall not exceed the height of the principal dwelling.
 - c. The ADU may be in the established rear or side setback but shall not be any closer to any rear or side lot line than the dimension of the required side setback of the zoning district of the subject property.
 - d. Heating, ventilation, or air conditioning equipment serving an ADU within an accessory structure and architectural features such as cornices, eaves, steps, gutters, and fire escapes may encroach into the required side and rear setbacks of the accessory dwelling unit by no more than 50% of the required side and rear setbacks.

17.1.F General Standards for Accessory Structures. For lots in residential use, the cumulative square footage of all accessory structures on a lot shall not exceed the total square footage of the heated area located on the first floor of the principal structure. Accessory structures open to the sky such as, but not limited to, pools and tennis courts, do not count towards this square footage limitation.

17.1.D.2.a Accessory structures with a height of 24 feet or more, or under 24 feet but with a height taller than the principal structure, shall be setback from any rear lot line a minimum of 15 feet and from any side lot line by the dimension of the required side setback for the zoning district. An ADU is not allowed to exceed the height of the principal structure.

DECLARATION – PLEASE CHECK A BOX

The proposed project is an accessory structure, which **is** ☐ / **is not** ☐ an accessory dwelling unit (ADU), as defined above. By declaring that the accessory structure "is not" an ADU, you are confirming that the structure will not be used as a dwelling/residence whether for short-term or long-term durations throughout the year. I understand that failure to properly permit this project may result in a Notice of Violation and/or other enforcement actions as necessary to achieve compliance with all applicable codes and ordinances.

Applicant's signature

Date

Print Applicant's Name



CITY OF CHARLOTTE
ZONING SUPPLEMENT FOR RESIDENTIAL PERMIT APPLICATION

(Please Print)

Submittal Number:			Project Number:		
APPLICANT INFORMATION					
Owner's name:			Applicant/ Contractor's Name:		
Applicant/ Contractor's Address:					
Project Street address:			Tax Parcel #:		Zoning:
City:	State:	Zip Code:	Subdivision Name:		Applicant Phone #: ()
Type of Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Accessory <input type="checkbox"/> Breezeway			Corner/ Thru Lot:		Utility Structures on Property:
Project Description:					
Proposed Impervious/Built Upon Area:					

OFFICE USE ONLY					
Front Setback Min.:		Property Line <input type="checkbox"/> Back of Curb <input type="checkbox"/>	Left Yard Min.:	Right Yard Min.:	Rear Yard Min.:
Petition Number:	Historic District:	Tree Save:	Watershed/ SWIM:	Max BUA:	% of Building Coverage:

DIMENSIONAL AND DESIGN STANDARDS RESIDENTIAL USES
(Property subject to all applicable footnotes on Tables 4-2 and 4-3)

Table 4-2: Neighborhood 1 Zoning Districts Building Siting Standards							
		N1-A	N1-B	N1-C	N1-D	N1-E	N1-F
A	Min. Front Setback from Street (Measured from Right-of-Way) (feet) 1, 2, 3, 4, 6	27	27	17	17	10	17
B	Min. Corner Side Setback from Street (Measured from Right-of- Way) (feet) 4, 5, 6	13.5	13.5	10	10	10	10
C	Minimum Side Setback (feet)	5	5	5	5	5	5
D	Minimum Rear Setback (feet)	40	35	30	25	20	20

¹ Front setbacks shown on a plat recorded at the Register of Deeds shall supersede required zoning district front setbacks.

Table 4-3: Neighborhood 1 Zoning Districts Building Height Standards

		N1-A	N1-B	N1-C	N1-D	N1-E	N1-F
A	Maximum Building Height – Residential (feet) ¹	48	48	40	40	40	48

APPLICANT CERTIFICATION

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE IS EITHER THE OWNER OR THE AUTHORIZED AGENT OF THE OWNER AND HEREBY MAKES APPLICATION FOR PERMIT AND INSPECTION OF WORK DESCRIBED AND AGREES TO COMPLY WITH ALL APPLICABLE LAWS, INCLUDING BUT NOT LIMITED TO THE CITY OF CHARLOTTE ZONING ORDINANCE,

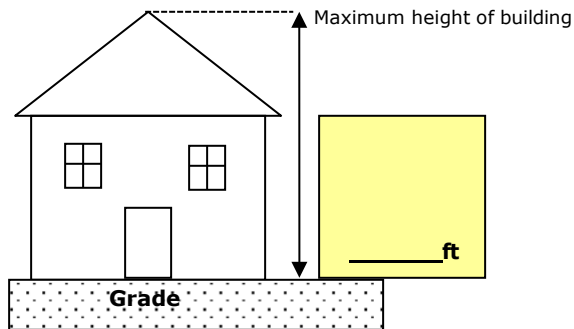
Name _____ Date _____ Applicant Signature _____

By issuance of this permit, the City of Charlotte has not determined the location or existence of any drainage, water or sanitary sewer facilities or easements that may exist on the property. These determinations remain the sole responsibility of the property owner. Sources for assistance with property information include, but are not limited to, the Mecklenburg County Register of Deeds, Charlotte Explorer (<https://explore.charlottenc.gov>), or a professional land surveyor.

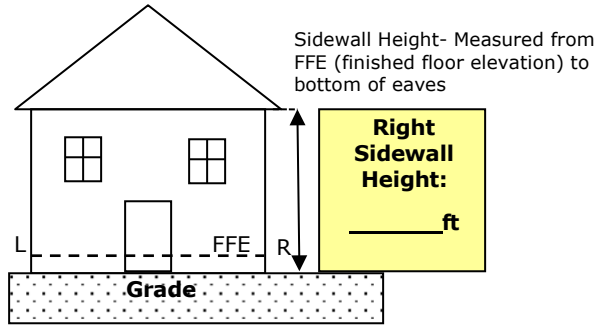
BUILDING ELEVATIONS FROM GRADE

To determine your building heights, submit your measurements in the in the appropriate boxes below. Areas in yellow are required information needed to process your permit application.

Single Family And Duplex

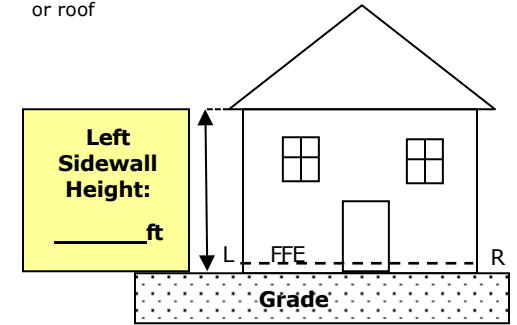


Duplex



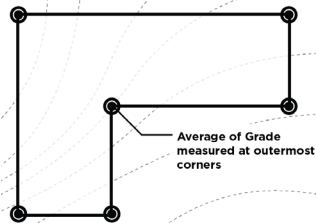
Duplex

Sidewall Height- Measured from FFE to bottom of eaves or roof

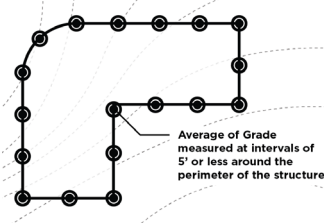


CALCULATING THE AVERAGE GRADE

As an option to the above requirement, average height from grade calculations can be determined by the two following methods. If utilizing this option, indicate your calculations in the spaces provided.

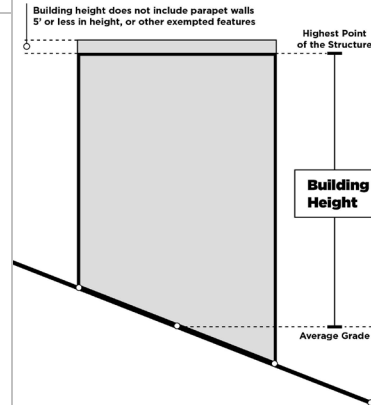


Adding the lowest and the highest point and dividing by 2



Adding all points, at five-foot intervals, starting at the corner along the base of the building and dividing the total by the number of points.

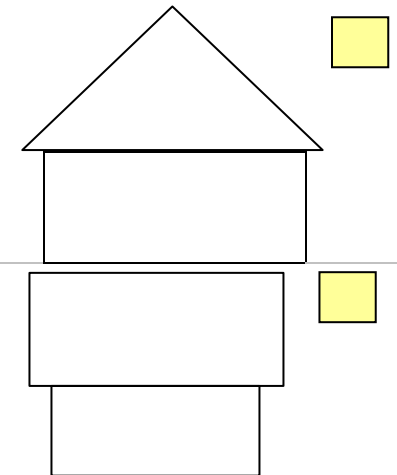
Building Height. Building height is the vertical distance between the average grade at the base of the structure and the highest point of the structure.



Building height:
Front _____
Left _____
Right _____
Rear _____

ROOF TYPE

Check a box to indicate the roof type.





PLOT PLAN FOR PERMIT APPLICATION

ONE/TWO FAMILY, MODULAR, MOBILE HOME OR ZONING USE

Permit #: _____

Street #: _____ (N,S,E,W) Street Name _____ (AV, RD, etc.) Suite #/Units _____

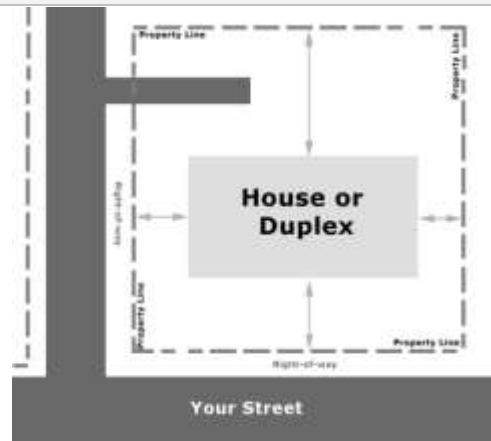
Tax Parcel #: _____ Job #: _____

INSTRUCTIONS:

In the space provided, draw plot plan as neatly and accurately as possible, from survey if available. Separate application and plot plan required for each building.

1. Draw street(s) and right-of-way(s)
2. Draw property lines with dimensions.
3. Draw proposed and existing buildings showing any attached porch(es), deck(s), chimney(s), carport(s) or garage(s), etc...
4. Show distances of buildings from property lines or other structures.
5. Show all major utility towers, when applicable.

Plot Plan Examples



ALL EXISTING AND PROPOSED BUILDINGS ON LOT ARE SHOWN WITH MEASUREMENTS INDICATED.

Applicant's signature _____

Date _____

PRINT APPLICANT'S NAME _____

Zoning Approved By: _____
Remarks: _____

Date: _____



MECKLENBURG COUNTY
Land Use and Environmental Service Agency

Date: _____

Phone # (where we can reach you) _____

Name: _____

Address: _____

CARD EXP DATE: _____

Printed Name: _____

Signature: _____

(Choose one only)

I, _____, give Mecklenburg County
Revenue Collection Department permission to charge \$ _____,
To my (Visa/MC/Discover) _____ for payment to the following
Acct # _____.

I, _____, give Mecklenburg County
Revenue Collection Department permission to charge \$, To my
(Visa/MC/Discover) _____ for payment of estimated
upfront fees for Project # _____.

PLEASE DO NOT WRITE CREDIT CARD NUMBER
ON THIS FORM

PEOPLE PRIDE PROGRESS PARTNERSHIPS
2145 Suttle Avenue Charlotte, North Carolina 28208-5237 (980) 314-2633 Fax (877) 289-9718
Luesa-sf@mecklenburgcountync.gov