Charlotte, NC 28208

CITY OF CHARLOTTE

ALL	YELLOW AREAS MUST BE COMPLETED	APPLICATI	ON FUR ZUNIN	G USE PERMIT	PRESS FIRMLY	
	STREET # (N,S,E,W) STR	EET NAME		(AV,RD,ST, etc)	PERMIT #	
LOCAT-OX-OSZER	SUITE/UNIT(S):		TAX PARCEL #		PROJECT #	
	PROPERTY OWNER					
	CITY	STATE	ZIP	_ PHONE #		
	APPLICANT'S NAME / CONTRACTOR		AL	DDRESS		
	CITY	STATE	ZIP	PHONE #		
	CONTRACTOR ACCOUNT #	Р	LACARD ISSUED:	□No □Yes TOTAL	_ FEE \$	
	PREVIOUS USE		INTENDED US	Ε		
	BUSINESS NAME					
NON-NG	ZONING: MINIMUM SETBACKS: FRONT LAND AREA / ACRAGE (sq. ft.) WATERSHED: No Yes REMARKS / CODE SECTION:	LEFT SIDE S	RIGHT SIDE SWIM BUFFER: \(\text{No} \) SURVEY REQU	REAR	HOLD REQUIRED: No Yes	
	PERMITTED INTENDED USE					
	ABC INSPECTION - USE ABC INSPECTION - FOR RESTAURAN ACCESSORY STRUCTURE (15.6) (M) ADULT CARE HOME ADULT ELECTRONIC GAMING ESTABI ALTERNATIVE CORRECTIONAL FACIL AUCTION / ARTS & CRAFTS / FAIRS / F MARKETS / RUMMAGE SALES BED& BREAKFAST CHILD CARE CENTER IN RESIDENCE FAMILY CHILDCARE HOME (1-8 CHILD GROUP HOME - (15.4 - UU) LANDFILL AND CLEARING & INERT DE	T USE UST ADD DIMEN LISHMENT ITY PLANT SALES/ F (6-12 CHILDREN) OREN) - (15.6 B	FLEA I) - (15.6 C) T B)	MOBILE FARMER'S MARKI MOBILE FOOD VENDOR - MOBILE RETAILVENDOR DUTOOR ENTERTAINMEN PLACE TYPE) PRIVATE STABLES - (15.5 ROOMING HOUSE - (15.5 SALES ASSOCIATED WITH EMPORARY CONSTRUCT EMPORARY CONTRACTO ARD (15.5 E) EMPORARY OUTDOOR E EMPORARY OUTDOOR S EMPORARY OUTDOOR S	(15.5 B) - (15.5 C) T (100 FT SEPRATION FROM N1 5 L) 5 M) H A HOLIDAY FION TRAILER DR'S OFFICE / CONTRACTOR'S NTERTAINMENT - (15.5 F) 14 DAYS CONSIGNMENT) - (15.5 C) SALES (UP TO 90 DAYS) - (15.5 G) STORAGE CONTAINER - (15.5 H)	
	LINDERSIGNED HEREBY CERTIFIES THAT HE/SH	IE IO EITUED TUE	OWNED OD THE AUTHOR		DANID LIEDERY MAKES ARRUSATION 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	APPRO	OVED BY / DATE
Make checks payable to: CITY OF CHARLOTTE	METHOD OF F □CARD /CHECK			
O Planning - Zoning & Permitting Division			EMERALD RQ #	
Object to NO 00000	ORIGINAL-White INSPECTOR-Blu	ie CUSTOMER-Yellow		



PLOT PLAN FOR PERMIT APPLICATION

Permit #:

ONE/TWO FAMILY, MC	DULAR, MOBILE HOME OR ZONING USE				
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.					
 Draw street(s) and right-of-way(s) Draw property lines with dimensions. Draw proposed and existing buildings showing any attached porch(es), deck(s), chimney(s), carport(s) or garage(s), etc Show distances of buildings from property lines or other structures. Show all major utility towers, when applicable. 					
	Plot Plan Examples				
House or Duplex	House or Duplex	House Supplied was			
Your Street	Your Street	Your Street			
ALL EXISTING AND PROPOSED BUILDINGS ON LOT ARE SHOWN WITH MEASUREMENTS INDICATED.					
Applicant's signature	Date	PRINT APPLICANT'S NAME			

Date:_

Zoning Approved By:__ Remarks:___



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,	\$
I,	\$, To my for payment of estimated

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