Town of Fairview

7516 Concord Highway Monroe NC 28110

Zoning Classification*:

*If Conditional Use, attach recorded permit

Commerical Or NON-RESIDENTIAL USE ZONING **PERMIT**

Applicant Name: Phone #: Email: Applicant Mailing Address: City State Zip Property Information Street Address:	Permit Number:	Date:	Fee I	Paid:	Check Nu	ımber:
Property Information Street Address: Tax Parcel Number: Area: Principal Use: Sign Square Footage Parking Spaces Provided: Proposed Feet Front Setback: Feet Front Setback: Feet Rear Yard Setback Feet Refet Right Side Yard Feet Right Side Yard Feet Right Side Yard Feet (Max) Bidg. Height Feet (Max) Bidg. Height Feet (Max) Footon 184 Building Setback Requirements of the Land Use Ordinance **See Section 184 Building Setback Requirements of the Land Use Ordinance ATTACH THE FOLLOWING: Two copies of a scaled dimensional survey drawn by and certified as true and correct by a surveyor engineer registered with the state of North Carolina which shows the shape, dimensions, and area of proposed local for proposed Istructure to be placed upon the lot; (b) all setback lines on the lot once the proposed structure is completed, affirmatively showing that the area of the proposed location will meet all setback requirements, and; (c) any other information that may be needed insure that the proposed structure is in compliance with all applicable provisions of the Town of Fairview Land Use Ordinance IHEREBY CERTIFY that all of the information provided for this application and all attachments are true and correct to the best of knowledge. I further certify that I am familiar with all requirements of the Town of Fairview Land Use Ordinance concerning this proposed use. I acknowledge that any violation of this ordinance will be grounds for revoking this permit and any subsequent permit issued by the Town of Fairview. APPLICANT SIGNATURE DATE	Applicant Name:		Phone #:		Email:	
Street Address:	Applicant Mailing Address:	·	City		State	Zip
Tax Parcel Number: Area: Street Frontage: Gross Floor Area: Principal Use: Principal Structure Requirements: Required:	••••••	Prope	rty Information	***************************************	······································	***************************************
Gross Floor Area: Principal Use:	Street Address:					
Principal Structure Requirements: Required: Feet Front Setback : Feet Rear Yard Setback : Feet Refeat Front Setback : Feet Right Side Yard : Feet Refeat Front Setback : Feet Refeat Front Setback : Feet Refeat Front Setback : Feet Front Setback	Tax Parcel Number:	ea:	St	reet Frontage:		
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	LAND USE ADMINISTRATOR			DATE		

Town of Fairview

7516 Concord Highway Monroe NC 28110

Procedure for Obtaining Zoning Permits for New Construction

Zoning Permit

- 1. A Zoning Permit is required for institutional and commercial uses.
- 2. Submit a scaled dimensional Plot Plan drawn by and certified as true and correct by a surveyor or engineer with the State of North Carolina which shows:
 - a) exact shape, dimensions, and location of the lot to be built upon
 - b) exact shape, dimensions, and location of existing structures on the land
 - c) exact shape, dimensions, and location of structures to be developed on the lot
 - d) all set back lines on lot
 - e) proposed parking facilities (if required)
 - f) landscaping and buffering plans (if required)
 - g) any other information that may be needed to insure that the proposed construction is in compliance with all applicable provisions of this Ordinance
- 3. The fee is \$500 for each permit.*

*Checks should be made payable to the

Town of Fairview 7516 Concord Highway Monroe NC 28110