

# Town of Fairview

7400 Concord Highway Monroe NC 28110

Zoning  
Classification\*:

\_\_\_\_\_  
\*If Conditional Use,  
attach recorded permit

## NON-RESIDENTIAL USE ZONING PERMIT

**\$300 or \$400**

Permit Number: \_\_\_\_\_ Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Check Number: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Property Information

Street Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_ Area: \_\_\_\_\_ Street Frontage: \_\_\_\_\_

Gross Floor Area: \_\_\_\_\_ Principal Use: \_\_\_\_\_

Sign Square Footage \_\_\_\_\_ Parking Spaces Provided: \_\_\_\_\_

### Principal Structure Requirements:

Required:		Proposed
_____ Feet	Front Setback :	_____
_____ Feet	Rear Yard Setback	_____
_____ Feet	Left Side Yard	_____
_____ Feet	Right Side Yard	_____
_____ Feet (Max)	Bldg. Height	_____
_____ Feet (Max)	Lot Width @ Front Setback	_____

\*\*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 or engineer registered with the state of North Carolina which shows the shape, dimensions and location of the lot to be built upon, uses and existing structures on the lot. Upon this survey shall be sketched the following : (a) the shape, dimensions, and area of proposed location of proposed structure 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 to insure that the proposed structure is in compliance with all applicable provisions of the Town of Fairview Land Use Ordinance \_\_\_\_\_.

I HEREBY CERTIFY that all of the information provided for this application and all attachments are true and correct to the best of my 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

\_\_\_\_\_

\_\_\_\_\_

THIS PERMIT IS: APPROVED \_\_\_\_\_

DISAPPROVED \_\_\_\_\_

LAND USE ADMINISTRATOR

DATE

\_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

# Town of Fairview

7400 Concord Highway Monroe NC 28110

Zoning Classification: _____
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## Application for Zoning Compliance NON-RESIDENTIAL USE

_____	_____	<b>\$100</b>	_____
Permit Number:	Date:	Fee Paid:	Check Number:
_____		_____	_____
Applicant Name:	Phone #:	Email:	
_____		_____	_____
Applicant Mailing Address:	City	State	Zip
_____	_____	_____	_____

### Property Information

Street Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_ Area: \_\_\_\_\_ Street Frontage: \_\_\_\_\_

Gross Floor Area: \_\_\_\_\_ Principal Use: \_\_\_\_\_

Sign Square Footage: \_\_\_\_\_ Parking Spaces Provided: \_\_\_\_\_

### Principal Structure Requirements:

Required:		Proposed
_____ Feet	Front Setback :	_____
_____ Feet	Rear Yard Setback	_____
_____ Feet	Left Side Yard	_____
_____ Feet	Right Side Yard	_____
_____ Feet (Max)	Bldg. Height	_____
_____ Feet (Max)	Lot Width @ Front Setback	_____

\*\*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 or engineer registered with the state of North Carolina which affirmatively shows that the building or structure was erected in compliance with the Town of Fairview Land Use Ordinance and the Zoning Permit previously issued.

I HEREBY CERTIFY that all of the information provided for this application and all attachments are true and correct to the best of my 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**

_____	_____
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THIS PERMIT IS:      APPROVED \_\_\_\_\_      DISAPPROVED \_\_\_\_\_

**LAND USE ADMINISTRATOR**

**DATE**

_____	_____
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Comments: \_\_\_\_\_

# *Town of Fairview*

7400 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 for buildings 4000 square feet or less is **\$300** and for buildings 4001 square feet or more **\$400** for each permit.\*

### **Certificate of Compliance**

1. No structure may be used or occupied until a certificate of compliance has been issued.
2. Submit a scaled dimensional Physical/Final Survey drawn by and certified as accurate by a surveyor or engineer registered with the State of North Carolina, including the building or structures constructed on the lot.
3. The fee is **\$100**.\*

### **\*Checks should be made payable to the**

**Town of Fairview  
7400 Concord Highway  
Monroe NC 28110**