



# Town of Wilkesboro

## ZONING COMPLIANCE PERMIT APPLICATION

Planning and Community Development  
 203 West Main Street | P.O. Box 1056  
 Wilkesboro, NC 28697  
 P: 336.838.3951 | F: 336.838.7616  
 planning@wilkesboronc.org

<b>APPLICATION</b>	DATE:	FEE:	<b>PERMIT APPLICATION NUMBER</b>		
	JURISDICTION: <input type="checkbox"/> Town of Wilkesboro <input type="checkbox"/> Extraterritorial Jurisdiction (ETJ)				
	<input type="checkbox"/> WATERSHED PERMIT	<input type="checkbox"/> ZONING COMPLIANCE PERMIT			
	<input type="checkbox"/> FLOOD DAMAGE PREVENTION (*separate permit required)				
	PROPERTY OWNER:				
	APPLICANT:				
	ADDRESS/ LOCATION:		PARCEL/ PIN ID:		
	PHONE:	FAX NUMBER:			
	EMAIL:				
	DESCRIPTION OF PROPOSED USE: *use separate sheet if necessary				
<b>PLEASE NOTE: Other types of permits may be required depending on development.</b>					
SIGNS PROPOSED? <input type="checkbox"/> YES* <input type="checkbox"/> NO		*SIGNS REQUIRE A SEPARATE PERMIT AND APPLICATION FEE AND THEY MUST COMPLY WITH SECTION 5.7 OF THE ZONING ORDINANCE			
<b><u>STOP HERE!</u> APPLICANT WILL BE REQUIRED TO SIGN PAGE TWO AFTER REVIEW AND COMPLETION OF THIS APPLICATION PROCESS BY TOWN STAFF. THE REMAINDER OF THE APPLICATION WILL BE FILLED OUT BY TOWN STAFF.</b>					
<b>ZONING INFORMATION</b>	ZONING DISTRICT:	USE CLASSIFICATION:			
	SUPPLEMENTAL STANDARDS?				
	WATERSHED CLASSIFICATION: <input type="checkbox"/> WS-PA IV <input type="checkbox"/> WS-CA IV <input type="checkbox"/> NOT APPLICABLE				
	<b><u>PROPOSED FLOODPLAIN DEVELOPMENT:</u></b> _____ (a) Must comply with all applicable flood damage prevention standards (*Separate permit required) _____ (b) Is exempt from flood damage prevention standards				
<b>LOT &amp; BUILDING INFORMATION</b>	MAX HEIGHT:	MIN. LOT AREA:	MIN. WIDTH:		
	FRONT SETBACK:	SIDE SETBACK (R):	(L):	REAR SETBACK:	
	<b><u>PARKING:</u></b> REQUIRED SPACES: _____ HANDICAP: _____				
	<b><u>ACCESSORY BUILDING INFORMATION:</u></b> PURPOSE: _____				
	SIDE YARD SETBACK:		REAR YARD SET BACK:		
	<b><u>OTHER DEPARTMENT / ZONING APPROVALS AND/OR INSPECTIONS REQUIRED:</u> *If a departmental box is checked, the applicant must contact that department for separate approval, as well as additional conditions and restrictions that may be required.</b>				
_____ BLDG. INSPECTIONS 336.651.7303		_____ FIRE INSPECTIONS 336.667.6228		_____ PUBLIC WORKS 336.838.0188	



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<b>FINAL DETERMINATION</b>	<p><i>This application has been reviewed by the Planning Staff and based on the information contained herein, along with the standards found in the Town of Wilkesboro ordinances and any other additional information obtained from an actual site visit the following determination has been made:</i></p>	
	<input type="checkbox"/> APPROVED	<input type="checkbox"/> APPROVED WITH RESTRICTIONS
	<input type="checkbox"/> DENIED*	
	<p>CONDITIONS / RESTRICTIONS:</p>          	
	<p><b>FOR THE APPLICANT:</b> <i>I certify that I have read and understood the information contained in this application and I will adhere to any conditions and/or restrictions specified above.</i></p>	
<p>SIGNATURE OF APPLICANT:</p>  	<p>DATE:</p>  	
<p>SIGNATURE OF REVIEW OFFICER:</p>  	<p>DATE:</p>  	
<p>*IF DENIED LIST REASON(S):</p>          		