



Planning & Zoning Application

CASE NO. _____

P&Z Fee: _____

SELECT ZONING APPLICATION TYPE:

Date Paid: _____

Receipt #: _____

Zoning Change

Special Use Permit

Planned Development

PROPOSED USE OF PROPERTY: _____

EXISTING USE OF PROPERTY: _____

ZONING INFORMATION: From Existing _____ District to Proposed _____ District

PROPERTY ADDRESS: _____

Legal Description: (Abstract) _____ (Tract) _____ (Block) _____ (Lot) _____

(Survey) _____ (Addition) _____

IF PROPERTY IS NOT PLATTED, PLEASE PROVIDE METES AND BOUNDS DESCRIPTION.

COMPLIANCE OF PROPOSED PROJECT TO ONE WATAUGA/COMPREHENSIVE MASTER PLAN:

- Will the proposed change enhance the site and the surrounding area? Yes No
- Is the necessary infrastructure already in place? Yes No (if not, explain in narrative)
- Is the proposed change a better use than that is recommended by Future Land Use Plan/Map?
Yes No
- Will the proposed use impact adjacent residential areas in a negative manner or may it enhance it?
Yes No
- Are uses adjacent to proposed use similar in nature in terms of appearance, hours of operation, and other general aspects of compatibility?
Yes No
- Does the proposed use present a significant benefit to public health, safety and welfare of community?
Yes No

OWNER INFORMATION: NAME: _____

(Please Print)

ADDRESS: _____

PHONE: _____ EMAIL: _____

For additional owners, please include additional copies of this page. The property owner may sign the application or submit a notarized letter of authorization.



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REPRESENTATIVE/AGENT INFORMATION: NAME: _____
(Please Print)

BUSINESS NAME (If applicable): _____
(Title)

BUSINESS ADDRESS: _____

PHONE: _____ EMAIL: _____

***I have read the completed application and know the same is true and correct and hereby agree that if a permit is issued all provisions of the City Ordinances and State Laws will be complied with whether herein specified or not. I agree to comply with all property restrictions. I am the owner of the property or the duly authorized agent.**

***Submittal of false information or omission as required by this application may result in any permit, license, or approval being revoked.**

***Signatures certify that all information provided is true and correct**

_____	_____	_____
Owner Name (Print)	Date	Owner Signature
_____	_____	_____
Agent Name (Print)	Date	Agent Signature

APPLICATION SUBMITTAL REQUIREMENTS

- Ten (10) folded copies of 24"x36" of a Site Plan (Technical requirements provided on separate sheet), Landscaping Plan, Elevations in color and one digital (PDF) copy of zoning exhibit.
- The following items are required with all types of applications:
- Zoning Application form.
- Application filing fee of \$300. This is non-refundable.
- One 11"x17" copy of subdivision plat (if the property is platted).
- One digital (PDF) copy of subdivision plat (if property is platted).
- If request is for (i) a portion of a platted lot, or (ii) an un-platted lot, surveyed site boundary dimensions (metes and bounds) and gross acreage determined by licensed surveyor must be provided electronically in Microsoft Word format and in paper copy.
- Additional information may be requested by the Development review Team if deemed essential for review and consideration by Planning and Zoning Commission and City Council.
- Written narrative explaining in detail the proposal.

OFFICE USE ONLY: CASE APPROVED BY:

PLANNING & ZONING COMMISSION:	_____ Yes _____ No	DATE: _____
CITY COUNCIL:	_____ Yes _____ No	DATE: _____
ADDITIONAL P&Z FEE: _____	RECEIPT #: _____	DATE: _____