



TOWN OF MARS HILL
 ADMINISTRATION OFFICE
 280 N. MAIN STREET • PO BOX 368
 MARS HILL, NC 28754
 PHONE: (828) 689-2301 • FAX: (828) 689-3333

ZONING PERMIT APPLICATION

Please print or type

GENERAL INFORMATION

Applicant Name: _____			Date: _____
Address: _____		City: _____	State: _____ ZIP: _____
Phone: _____	Fax: _____	E-mail address: _____	

LOCATION OF DEVELOPMENT

Street Address: _____
 Property Identification Number (PIN): _____
 Township: _____ Sheet: _____ Lot: _____
 Current Zoning District: _____
 Vacant Site: YES NO

REQUESTED DEVELOPMENT

Check one:
 New Structure Addition to Existing Repair Renovation Other _____

TYPE OF USE / PROJECT COST

Use of Property: _____ Total Estimated Cost: _____
 Contractor (if other than owner): _____

PLOT PLAN

Attach site plan, plat, property map, and/or draw plan accurately and to scale. Show dimensions of lot and locate structures by dimensions from property lines.

CHARACTERISTICS OF SITE

Staff to complete this section.

Front Yard: _____	Rear Yard: _____	Side Yards: _____	Lot Area: _____	Corner Lot: <input type="checkbox"/> YES <input type="checkbox"/> NO
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CERTIFICATION

If a permit is granted I/We agree to conform to all Town ordinances and the laws of the State of North Carolina regulating such work and consistent with the specifications and/or plans submitted. I/We hereby affirm that the foregoing statements are accurate and true to the best of my understanding and knowledge.

SIGNATURE OF APPLICANT: _____ DATE: _____

Office Use Only

REFUSED BY: _____ DATE: _____ REASON: _____

APPROVED BY: _____ DATE: _____

PERMIT FEE: \$ _____ PERMIT #: _____