



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 |
|-------------------|------------------|-------------------|-----------------|---|

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 #: _____