

# Zoning Permit

## Town of Hildebran

109 South Center Street  
Hildebran, North Carolina 28637  
828-397-5801

Zoning Permit/Building Application No. \_\_\_\_\_  
Owner/Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_  
Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Location \_\_\_\_\_  
Parcel I.D. Number: \_\_\_\_\_ Fire District \_\_\_\_\_

Permit Requested:     New Construction                     Remodeling  
                               Sign                                             Mobile Home  
                               Addition/Alteration                     Plumbing  
                               Mechanical                                 Electrical  
                               Insulation                                     Demolition  
                               Septic Tank                                 Excavation/Filling\*

Description of Work:\*\* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Subcontractors        Electrical: \_\_\_\_\_  
                                 Plumbing: \_\_\_\_\_  
                                 Mechanical: \_\_\_\_\_  
                                 Insulation: \_\_\_\_\_

Total Estimated Cost    \$ \_\_\_\_\_

Type of Use             Single Family Residential                     Industrial  
                               Multi-Family Residential                     Accessory  
                               Commercial                                     Institutional

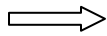
Notes: \_\_\_\_\_  
\_\_\_\_\_

Zoning District     R-20    R-10    CBD    NB    HB    GM    IOD    MHO

Yard Requirements: Front \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_  
 Corner Lot  
 1-1-1/2 Story  
 2-2-1/2 Story  
 Spilt Level

Is structure in Right-of-Way of:                     Railroad  
                                                                  City Utilities  
                                                                  Proposed Thoroughfare  
                                                                  Neither

Percentage (%) of Lot In Building Coverage: \_\_\_\_\_ %

Is Permit Result of A:     Variance                                     Rezoning  
                                                  Conditional Use                                 Neither                                     Continued on Back

# Zoning Permit

Have all Utility Connections Been Removed ( ) Yes ( ) No ( ) Not Applicable  
(For Demolition Purposes Only)

**IF DWELLING IS TO BE PROVIDED SEWER BY THE TOWN OF HILDEBRAN, THE TAP MUST BE PURCHASED WITHIN SIX MONTHS FROM THE DATE OF ZONING PERMIT**

Utility Service ( ) Water ( ) Septic Tank  
( ) Sewer ( ) Gas  
( ) Well ( ) Electricity

If Sewer checked above, will Town or County provide service? \_\_\_\_\_

Will Structure be Sprinkled? ( ) Yes ( ) No

Type of Heat: \_\_\_\_\_ Size Electrical Service: \_\_\_\_\_

Flood Hazard Information: \_\_\_\_\_  
Is Property in a Flood Plain Area? \_\_\_\_\_ If yes, provide Panel Number \_\_\_\_\_

If Permit Is for Demolition: Where will debris be dumped? \_\_\_\_\_  
Which Roads will be traveled? \_\_\_\_\_

What type of Materials will be dumped? \_\_\_\_\_  
\_\_\_\_\_

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I DO HEREBY CERTIFY THAT THE FOREGOING STATEMENTS ARE ACCURATE AND CORRECT TO THE BEST OF MY UNDERSTANDING AND KNOWLEDGE AND I AGREE TO CONFORM TO ALL TOWN ORDINANCES AND LAWS OF THE STATE OF NORTH CAROLINA REGULATING AND ANY PLANS OR SPECIFICATIONS SUBMITTED:

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF ZONING OFFICIAL \_\_\_\_\_ DATE: \_\_\_\_\_

THIS PERMIT SHALL EXPIRE AND BE CANCELLED UNLESS THE WORK AUTHORIZED WITHIN SIX (6) MONTHS OF ITS DATE OF ISSUE, OR IF THE WORK AUTHORIZED BY IT IS SUSPENDED OR ABANDONED FOR A PERIOD OF ONE YEAR.

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\*\*WHEN PLACING STRUCTURES ON PROPERTY YOU MUST SUBMIT A DRAWING SHOWING THE DISTANCE THE STRUCTURE WILL BE AWAY FROM ALL PROPERTY LINES AND RIGHT OF WAYS.