

Town of Waxhaw
 Planning and Inspections Department
 1150 N. Broome Street, PO Box 617
 Waxhaw, NC 28173
 704-843-2195
 www.waxhaw.com
 Inspections requests:
 inspections@waxhaw.com

Date Received

Permit Fee

Permit Case Number:

ZONING CONSTRUCTION PERMIT

Confirm work with HOA prior to permit submittal

Date of Application: _____

Applicant Name: _____ Telephone: _____

Applicant Mailing Address: _____

Applicant Email Address: _____

Property Owner Name: _____ Telephone: _____

Property Owner Mailing Address: _____


Type of Construction (check one):

- New Structure
- Addition
- Accessory Structure
- Other (specify) _____

Address/Location of Property: _____

Subdivision Name (if applicable): _____ Lot No. _____

Parcel Number: _____ Zoning: _____

Flood Plain on property: (check one) No Yes**  Floodplain Development and Zoning Construction Permit must be used!

Lot Size: _____

It is the applicant's responsibility to secure documentation of the availability options below:

- Is public water available on site? No Yes
- Is well water? No Yes
- Is public sewer available on site? No Yes
- Is septic? No Yes
- Is there the required access to a Town street? No Yes (then proceed)
- Is access maintained through an NCDOT street? No Yes (NCDOT permit required)
- Have you contacted your HOA regarding work? No Yes

APPLICANT IS TO COMPLETE 'PROPOSED' COLUMN ONLY

	<u>REQUIRED</u>	<u>PROPOSED</u>
Front Setback	_____ ft	_____ ft
Rear Setback	_____ ft	_____ ft
Side Yard Left	_____ ft	_____ ft
Side Yard Right	_____ ft	_____ ft
Building Height (Max.)	_____ ft	_____ ft
Lot Coverage of Structures (Max.)	_____ %	_____ %

Accessory Structure Setbacks: Front: _____ Rear: _____ Left: _____ Right: _____

ATTACHMENTS

In order to be considered complete, the following must accompany each application:

1. Application fee (cash or check made payable to the Town of Waxhaw).
2. A scaled dimensional survey drawn by and certified as true and correct by a surveyor or engineer registered with the State of North Carolina which shows (a) the exact shape, dimensions and location of the lot to be built upon, and (b) the exact shape, dimensions, use and location of existing structures on the lot. Upon this survey shall be sketched the following: (a) the exact shape, dimensions and area of proposed location of the proposed structure(s) to be placed upon the lot; (b) all setback lines on the lot once the proposed residence is completed, affirmatively showing that the area of proposed location will meet all setback requirements; and (c) any other information that may be needed to insure that the proposed structure is in compliance with all applicable provisions of this Ordinance.

CERTIFICATIONS

1. I hereby certify that all of the information provided for this application is, to the best of my knowledge, accurate and complete, and that the structure(s) in question are being served at this time by an approved water and sewer system.

(Signature of Applicant)

(Date)

2. I, _____, Owner of Property _____
(Signature of Property Owner) (Date)

3. This application is accepted, and to the best of my knowledge, deemed to be complete.

THE FOLLOWING SHALL BE FILLED OUT BY THE ZONING ADMINISTRATOR

Based on the information hereby furnished to me, and my knowledge of the Waxhaw Unified Development Ordinance, **I HEREBY:**

APPROVE

DISAPPROVE

COMMENTS / CONDITIONS: _____

Zoning Administrator _____ Date _____

Staff Reviewer _____ Date _____

THIS PERMIT IS VALID FOR SIX MONTHS FROM DATE OF ISSUE