



P.O. Box 2475, Surf City, NC 28445
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Permit # _____

Fee: \$10.00

Date: _____

ZONING PERMIT APPLICATION

PLEASE PRINT CLEARLY

Address of Construction: _____

Property Owner: _____ Phone # _____

Address: _____

Applicant: _____ Phone # _____

Address: _____

Completed by Staff:

Tax ID # _____ Zoning: _____

Square Footage of Lot: _____

Setbacks: Front: _____ Rt. Side: _____ Lt. Side: _____ Rear: _____

Proposed Use _____ Commercial Multi-Family Modular Home

Single Family Mobile Home Accessory Addition Change of Use Other

Comments:

I, the undersigned do hereby certify that all of the above statements are true to the best of my knowledge and understand that any deviation, change, or alteration not included or shown on these plans will alter the approval so granted.

Applicant Signature _____ Date _____

***Please include plans on next sheet**

Zoning Approval: _____ Date: _____ Zoning Approval C/O: _____ Date: _____
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**Town of Surf City
Zoning Permit Plot Plan**

LOCATION/SITE DATA

Street # _____ (N,S,E,W) _____ Street Name _____ (Av,Rd,St)
Project/Subdivision Name _____ Phase _____ Section _____
Land Area (sq. ft.) _____

OWNER INFORMATION

Owner: _____ Address: _____
City: _____ State _____ Zip _____ Phone # _____

PROJECT DATA

Describe Work Below

The above approvals are based and limited to evaluation of information provided with the permit application and include only the specific approvals listed. This permit does not constitute approval of any uses or structures not shown on the application or of any related request not included on the application

DRAW PLOT PLAN - Show what the permit is requesting. *If there are no additions or extensions, what work is being done.*

SHOW ALL LOT DIMENSIONS, STREETS, WATERWAYS AND OTHER STRUCTURES

Applicant's Signature _____

Date _____

Print Applicant's Name _____

Contractor Name _____

Approved by: _____
Date: _____