

**LOUISBURG ZONING PERMIT**

**Permit#** \_\_\_\_\_

New Construction \_\_\_\_ Demolition \_\_\_\_ Improvement \_\_\_\_  
Proposed Use: \_\_\_\_\_

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Property Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

Applicant: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_

Tax Map# \_\_\_\_\_ Tax Record# \_\_\_\_\_ Zoning \_\_\_\_\_ Flood Plain \_\_\_\_\_  
Non-Conforming cont. \_\_\_\_\_ Watershed Area: Protected Area \_\_\_\_\_ Critical  
Area \_\_\_\_\_

**Utilities**

Electric non-city: \_\_\_\_\_ City Electric: \_\_\_\_\_  
Water: Well \_\_\_\_\_ City Water: \_\_\_\_\_  
Sewer: Septic \_\_\_\_\_ City Sewer: \_\_\_\_\_

**Special Permits or Requirements**

Special Exception: \_\_\_\_\_ Council Approval date: \_\_\_\_\_  
Conditional Use: \_\_\_\_\_ Brd. of Adjustment Approval date: \_\_\_\_\_  
Variance Issued: \_\_\_\_\_ Brd. of Adjustment Approval date: \_\_\_\_\_

**Yard Requirements**

Front yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Rear Yard \_\_\_\_\_ Corner \_\_\_\_\_

**Applicants Certification**

I certify that all of the statements made in this application and any attached documentation are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may result in the rejection of this permit or subsequent revocation of this permit. Authorized town officials are granted right of entry to make evaluations or inspections as to compliance and to release information upon public request. I understand that additional State and County permits may be required prior to occupancy of requested use. I further understand that a Certificate of Compliance shall be required and issued by the Town of Louisburg prior to the occupancy and/or commencement of operations of the proposed use.

\_\_\_\_\_  
Signature of Applicant/Owner/Agent Date

**This permit is issued pursuant to information contained herein and provided by the owner and/or agent. Information determined to be false or failure to comply with all appropriate Statutes, Codes, and Regulations may result in the immediate revocation of this permit.**

\_\_\_\_\_  
Town Official Date

Special  
Requirements/Notes: \_\_\_\_\_  
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