

**TOWN OF WRIGHTSVILLE BEACH APPLICATION FOR ZONING PERMIT (ZP)**

*Any change or changes in development, construction, or land use activities as represented in this application and/or accompanying plans will require a re-evaluation and modification of this permit. Applicants, property owners, authorized agents and/or contractors are responsible for compliance with any and all permit conditions and adherence to the Town's Code of Ordinances.*

**Zoning Permit Type:**

( ) New SFD ( ) New Duplex ( ) Renovation ( ) Sign ( ) Fence ( ) Landscaping ( ) Driveway ( ) Walkway ( ) Other

**PROPERTY OWNER:** \_\_\_\_\_

**PROJECT ADDRESS:** \_\_\_\_\_

**OWNER'S ADDRESS:** \_\_\_\_\_ ZIP: \_\_\_\_\_

**OWNER'S EMAIL:** \_\_\_\_\_ Phone: \_\_\_\_\_

**UNIT TYPE:** ( ) MULTI-FAMILY ( ) DUPLEX ( ) SINGLE FAMILY DWELLING

**STRUCTURE USE:** ( ) RESIDENTIAL ( ) COMMERCIAL ( ) GOVERNMENT

**CONTRACTOR NAME:** \_\_\_\_\_

**CONTRACTOR'S ADDRESS:** \_\_\_\_\_ ZIP: \_\_\_\_\_

**CONTRACTOR'S EMAIL:** \_\_\_\_\_ Phone: \_\_\_\_\_

**STATE LICENSE NO:** \_\_\_\_\_ **EXP:** \_\_\_\_\_

**COST OF PROJECT: \$** \_\_\_\_\_

**PROJECT DESCRIPTION:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

In addition to a textual project description, you are required to provide an illustrative site plan or other applicable documentation to represent your property and the proposed development/project, including lot size, location of existing structures, setbacks, and the location of proposed development. If you are unable to accurately represent your property and development proposal in illustrative form, please provide a survey showing all required information. Zoning Permit approval is contingent upon your submission of detailed and accurate information and materials associated with your request.

\*\*I understand that the fee for this application is non-refundable. \_\_\_\_\_ (Initial)

\*\*I furthermore certify that I am authorized to grant and do in fact grant permission to Planning Staff and his/her agents to enter on the aforementioned lands in connection with evaluating information related to this permit application. \_\_\_\_\_ (Initial)

Print Applicant's Name \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**This Section Is for Staff Use Only**

Zoning Permit # \_\_\_\_\_

Signs and Driveways **\$75**

Existing Use & New Development **\$100**

**PAID ( )**

**ZONING AUTHORIZATION BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPROVED WITH THE FOLLOWING CONDITIONS:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TOWN OF WRIGHTSVILLE BEACH  
APPLICATION FOR ZONING PERMIT**

OWNER: \_\_\_\_\_ LOCATION OF WORK: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ LIC. # \_\_\_\_\_ EMAIL: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_ ENGINEER: \_\_\_\_\_

COST OF PROPOSED WORK: \$ \_\_\_\_\_ TAX VALUE OF STRUCTURE: \$ \_\_\_\_\_

**IMPROVEMENT TYPE:** NEW ( ) RETROFIT ( ) ADDITION ( )

**SETBACKS**

ZONING DISTRICT \_\_\_\_\_ INTENDED USE \_\_\_\_\_ TOTAL LOT SIZE IN SQUARE FEET \_\_\_\_\_ SQ FT

LOT DIMENSIONS FRONT \_\_\_\_\_ REAR \_\_\_\_\_ SIDE \_\_\_\_\_ SIDE \_\_\_\_\_ SIDE \_\_\_\_\_

SETBACKS: FRONT \_\_\_\_\_ SIDE \_\_\_\_\_ REAR \_\_\_\_\_ HEIGHT \_\_\_\_\_

**FLOOR AREA RATIO**

**MEASURED AREA ABOVE BFE**  
(70% of total lot square footage)

**DECKS AND COVERED PORCHES**  
(25% of measured area)

**MAXIMUM PERMITTED:** SQ FT \_\_\_\_\_

SQ FT \_\_\_\_\_

EXISTING: SQ FT \_\_\_\_\_

SQ FT \_\_\_\_\_

PROPOSED BY APPLICANT: SQ FT \_\_\_\_\_

SQ FT \_\_\_\_\_

**FLOOD REGULATIONS:**

FLOOD ZONE \_\_\_\_\_ BASE FLOOD ELEVATION \_\_\_\_\_

PROPOSED HEIGHT FINISH FLOOR: \_\_\_\_\_ ENCLOSED GARAGES: \_\_\_\_\_ SQ. FT.

ADDITIONAL ENCLOSED SPACE AT GRADE LEVEL \_\_\_\_\_ SQ FT FLOOD VENTS: YES \_\_\_\_\_ NO \_\_\_\_\_

ELEVATION CERTIFICATE: \_\_\_\_\_ MSL REF. BENCH MARK: \_\_\_\_\_ M.S.L.

**PARKING REQUIREMENTS**

SPACES REQUIRED: \_\_\_\_\_ SPACES PROPOSED: \_\_\_\_\_

TOTAL TOILETS: \_\_\_\_\_ FIELD VERIFIED: \_\_\_\_\_ (insp initial)

**FIRE COMPLIANCE**

FIRE DISTRICT: \_\_\_\_\_ CHANGE IN OCCUPANCY: YES \_\_\_\_\_ NO \_\_\_\_\_

LOCAL COMPLIANCE AUTHORIZATION: \_\_\_\_\_ DATE \_\_\_\_\_ NH CO COMPLIANCE: \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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forementioned lands in connection with evaluating information related to this permit application.\*\* \_\_\_\_\_ (Initial)

PRINT APPLICANT NAME \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ DATE: \_\_\_\_\_ Zoning Permit # \_\_\_\_\_