



Town of Edenton
400 South Broad Street
PO Box 300
Edenton, NC 27932

Permit No. _____
Fee \$50

Staff Decision (initials)
_____ Approved
_____ Denied

COMMERCIAL ZONING PERMIT APPLICATION

Complete this application in compliance with Article IV and Article IX of the Unified Development Ordinance. **This is NOT an application to petition for a zoning classification change (i.e. rezoning). Zoning Permits are required for all new and existing businesses when a new location for the business operation/use is proposed.** In order to ensure that the proposed business operation and land use are permissible and all development standards comply with Town regulations, the applicant is recommended to review the Town's Unified Development Ordinance; the Ordinance may be accessed at www.townofedenton.com.

The Zoning Permit Application fee is \$50. This fee does not include the cost of the privilege license, sign permit, or construction permits. All fees are non-refundable and non-transferrable once the application has been processed. Applications will not be reviewed unless fees have been paid in full.

All application petition responses must be typed or handwritten in blue or black ink. All responses must be legible and filled out completely. Illegible and/or incomplete applications will be returned to the applicant. **Applications are not accepted via facsimile or e-mail.** Submit the completed application and privilege license application, with supporting documents, and fees to the Town of Edenton Planning Department via delivery or U.S. Mail. **Allow at least 3-5 business days for review and processing of all applications.**

Depending on the nature of your business operation and land use, a prospective proprietor may require additional review and authorization from the Town and non-Town agencies before being issued a Zoning Permit and Privilege (Business) License. Fire Inspector (252-482-3115) and Building Inspector (252-482-5618) should be consulted regarding Fire Code, Building Codes and ADA Code compliance requirements. If property is located within the Historic District, consult with Planning Office for information on Historic District Commission rules and regulations at 252-482-2155.

**PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION
INCOMPLETE & ILLEGIBLE APPLICATIONS WILL BE RETURNED
INDICATE "NOT APPLICABLE" OR "N/A" WHERE APPROPRIATE**

SECTION A-APPLICANT INFORMATION

Business Owner's Name: _____
Street Address: _____
City/State/Zip Code: _____
Phone Number(s): _____ (Daytime) _____ (Alternate)
Email Address: _____
Signature: _____

SECTION B-PROPERTY & BUSINESS INFORMATION

1. Landowner's name: _____
2. Property Address: _____
3. Parcel ID(s) (12-digit): _____
4. Zoning Classification: _____ Overlay District (if applicable) _____
5. Tax Map Number: _____ Block: _____ Lot: _____
6. Location: This property is located on the _____ (direction) side of _____ (street) between _____ (street) and _____ (street).
7. Existing Structure: Yes() No() Dimensions (in square feet) of structure/unit: _____
8. No. of Parking Spaces Provided: _____
9. Outdoor Storage and Trash Receptacle On-Site: Yes() No() If yes, where is it/are they located and indicate the type of screening.

10. Name of Business: _____
11. Proposed Use/Description of Business Operation:

12. Standard Industrial Classification (SIC) Code (4-digit): _____
13. Total Number of Employees (Include Full and Part-Time): _____
14. For Child and Adult Daycare Operations, complete the following:
 - a. Indicate the type of daycare facility (Child or Adult): _____
 - b. Number of clients to be served: _____
 - c. Has fencing been installed around any and all outdoor play areas? Yes () No()
15. For Beauty/Barber Salon Operations, complete the following:
 - a. How many barbers, stylists, and/or technicians will be employed? _____
 - b. How many chairs and/or work stations will be located at the business? _____
16. For Food Service Operations, complete the following:
 - a. Have you contacted the Edenton Public Works Department regarding the Fats, Oils, and Grease Disposal Program? Yes() No(). If yes, provide documentation that the business location has been inspected and approved by the Public Works Director.
 - b. Have you contacted the Albemarle Regional Health Division of Environmental Health Services or NC Department of Agriculture and Consumer Services Food and Drug Protection Division regarding your food services operation? Yes() No(). If yes,

provide documentation that the business location has been inspected and approved by the respective agency.

SECTION C-AUTHORIZATION

A COPY OF THE PROPERTY LEASE AGREEMENT DOES NOT SATISFY THE AUTHORIZATION REQUIREMENT-THIS FORM MUST BE COMPLETED

NOTE: IF THE PERSON REQUESTING THE TOWN OF EDENTON TO TAKE ACTION ON A PARTICULAR PIECE OF PROPERTY IS NOT THE OWNER OF THE PROPERTY OR UNDER CONTRACT TO PURCHASE THE PROPERTY THEN THE ACTUAL OWNER OF THE LAND MUST COMPLETE THIS FORM WITH HIS/HER SIGNATURE NOTARIZED. IF THE PROPERTY OWNER IS THE APPLICANT PLEASE COMPLETE THE SECTION BELOW AND SIGN AS INDICATED.

FAX, SCAN, OR COPY IMAGES OF THE ORIGINAL DOCUMENT WILL NOT BE ACCEPTED.

I, _____ (LANDOWNER'S NAME) am the owner of the property located in the Town of Edenton planning jurisdiction at:

Street Address: _____

I hereby authorize _____ (OWNER OR APPLICANT'S NAME) to apply with my consent for a Zoning Permit at the above noted location. I understand this business is not to be operated until a Zoning Permit is issued. I authorize the applicant to present this application in my name as the owner of the property. I hereby authorize Town Officials to enter my property to conduct relevant site inspections as deemed necessary to process the application. All information submitted and required as a part of the approval process shall become public record. I as the land owner hereby CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE TO THE BEST OF MY KNOWLEDGE AND BY ACCEPTING THIS PERMIT, if approved shall in every respect conform to the terms of the application and to the provisions of the Statutes and Ordinances regulating development in the Town of Edenton. Any VIOLATION of the terms above stated immediately REVOKES this Permit and the maximum penalties allowed by law may apply to me, the applicant, and/or my agent. If there are any questions you may contact me at:

Street Address: _____

City/State/Zip Code: _____

Phone Number: _____

Email Address: _____

Owner's Signature: _____

Sworn to and subscribed before me, this the _____ day of _____, 20____.

Notary Public

My commission expires: _____

(Seal)

FOR STAFF USE ONLY-DO NOT WRITE IN THIS AREA

Property Ownership and Authorization Verified Yes () No()

Current Zoning Verified As: _____

No. of On-Site (Off Street) Parking Spaces Verified As: _____

No. Of On-Site (Off Street) Parking Spaces Required: _____

Dumpster/Trash Receptacle On-Site Location: _____

Screened? Yes() No()

Additional Screening (if necessary): _____

SIC Verified As: _____

Outside Agency (ARHS, Public Works, etc.) Authorization Noted and Verified Yes () No ()

If yes, append copies to file.

Required Site Improvements, if any:

DO NOT RELEASE PERMIT UNTIL ALL SITE IMPROVEMENTS ARE COMPLETED

Permit Conditions, if any:

Permit Notes and Comments:

Date Application Review Completed: _____