City of Mount Airy

Department of Planning & Community Development
300 S Main Street, P.O. Box 70, Mount Airy, NC 27030
P: (336)786-3520 / E: planning@mountairy.org

ZONING COMPLIANCE PERMIT APPLICATION

Date _____

Address of property for which permit is requested _____

Tax I.D. # _____ _____ _____ Construction Value _____
Map Block Parcel

Property Owner _____ Telephone No. _____

Property Owner Address _____

Applicant Name _____ Telephone No. _____

Existing Use/Business Name _____

Property Information:			
Utilities: ☐ Public Water ☐ Public Sewer ☐ Private Well ☐ Private Septic	Zoning:	Flood Hazard Area:	
Watershed: YES NO	Historic District: __ YES __ NO	Additional Overlay: _____	

PROPOSED USE:

For structures, provide dimensions: Width: _____ x Length: _____ Square Footage: _____ sq. ft.

SITE IMPROVEMENTS (CHECK ALL THAT APPLY):

☐ New construction	☐ Home Occupation	☐ Demolition
☐ Addition	☐ Parking	☐ Driveway access approval
☐ Accessory Structure	☐ Landscaping/Buffers	☐ Co-Location (Telecommunications)
☐ Manufactured Home	☐ Non-conforming use	☐ Temporary Use: _____
☐ Remodeling / Upfit	☐ Change in use	☐ Other: _____

ATTACHED IS A SITE PLAN DRAWN TO SCALE SHOWING DIMENSIONS OF LOT, LOCATION OF PROPOSED IMPROVEMENTS, A LANDSCAPING, AND PARKING PLAN, IF APPLICABLE.

***** For public water and/or sewer availability, contact Public Works at (336)786-3580*****

Proposed Height _____	Height Limits *See ZO*	Rear Yard Available _____	Required *See ZO*
Front Yard Available _____	Required *See ZO*	Lot Area Available _____	Required *See ZO*
Side Yard Available _____	Required *See ZO*	Lot Width _____	Required *See ZO*
Side Yard Available _____	Required *See ZO*	Lot Coverage (%) _____	Required *See ZO*

Landscaping: _____ Signage: _____ Parking: _____

ADDITIONAL COMMENTS:

I certify that all information included with this application is true and correct and agree to conform to all city ordinances and the laws of the State of North Carolina regarding this work.

_____ _____
Signature Date