



SAMPSON COUNTY

PLANNING & INSPECTIONS



Planning: (910) 631-1039
Inspections: (910) 592-0146



Planning: planning@sampsoncountync.gov
Inspections: inspections@sampsoncountync.gov



Address: 335 County Complex Rd, Bldg D Clinton, NC 28328
Hours of Operation: Monday – Friday, 8am – 5pm

COMMERCIAL ZONING PERMIT APPLICATION

APPLICATION REVIEW FEE: \$200

PROJECT INFORMATION

PROJECT/BUSINESS NAME: _____

IS THIS A PERMIT APPLICATION FOR A NEW COMMERCIAL SITE? YES _____ NO _____

PROPOSED USE (RESTAURANT, MINI STORAGE, ETC. PLEASE EXPLAIN):

PROPOSED STRUCTURES & SITE ELEMENTS (OFFICE, SHED, PARKING LOT PLEASE EXPLAIN):

SITE INFORMATION

PROPERTY ADDRESS: _____

PIN (PROPERTY ID NUMBER): _____

DEED BOOK/PAGE NUMBER: _____ ZONING DISTRICT: _____

PROPERTY ACREAGE: _____

EXISTING USE (VACANT, RESIDENTIAL, INDUSTRIAL, ETC. PLEASE SPECIFY):

APPLICANT INFORMATION

APPLICANT NAME: _____

BUSINESS NAME (IF APPLICABLE): _____

CONTACT PERSON NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____ EXT: _____

EMAIL ADDRESS: _____

PROPERTY OWNER INFORMATION

If the applicant is not the property owner, attach a complete owner's consent form giving express authorization of this commercial zoning permit application.

PROPERTY OWNER NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____ EXT: _____

EMAIL ADDRESS: _____

APPLICANT SIGNATURE

I, _____ certify that all information provided with this application is accurate. By signing this application, I am acknowledging that I am responsible for obtaining the proper permits from Sampson County Building Inspections and Environmental Health. Failure to obtain a Certificate of Occupancy Permit from Sampson County Building Inspections will render the zoning permit associated with this application invalid. I acknowledge if the Zoning Officer requires a site plan and that if the structure is located on the property in any location other than what is show on my submitted site plan, then I as the applicant accept sole responsibility for non-compliance.

APPLICANT SIGNATURE

DATE

REQUIRED SITE PLAN

Applications submitted without a site plan will not be processed.

In compliance with Section 2.202.C. of the Sampson County Zoning Ordinance, every Zoning Permit application for a Zoning Permit to be accompanied by a site plan showing the following in sufficient detail so that the Zoning Officer may determine whether the proposed activity is in compliance with the Sampson County Zoning Ordinance. The site plan shall be of sufficient detail and be prepared by a North Carolina licensed land surveyor or engineer. The site plan shall contain the following items listed below. All items may not be applicable due to the nature of the request. The Zoning Officer may also require additional information dependent upon the nature of the request.

PLEASE SUBMIT A SITE PLAN COMPLETE WITH THE FOLLOWING MINIMUM REQUIREMENTS:

1. Zone lot with dimensions.
2. Adjoining properties, property owners and uses.
3. Existing structures.
4. Proposed structure(s) with dimensions.
5. Proposed use.
6. Number of employees, if applicable.
7. Hours of operation, if applicable.
8. Off-street parking, loading and unloading, access to existing streets.
9. Easements and Rights-of-ways.
10. Floodplains or statement not in flood plain.
11. Wetlands and other areas of environmental concern, or statement that none exist.
12. Name, location and dimension of any proposed streets, drainage facilities, parking areas, required yards, required turnarounds as applicable.
13. Proposed phasing, if applicable.
14. Areas not served by public wastewater facilities, documentation showing that each lot can reasonably support a septic system and repair area or, in the alternative, the location of any shared outlying drain fields/wastewater systems.
15. Location of access and utility easements to be reserved and dedicated in support of any adjoining properties that do not possess a public right of way to a public street.

FOR OFFICE USE ONLY

APPROVED _____

DENIED _____

REVIEWED BY: _____

DATE: _____

NOTES:

THIS APPROVAL IS BASED ON THE INFORMATION SUPPLIED. IF THE INFORMATION IS IN ERROR, THEN THIS CERTIFICATE IS NULL AND VOID. A NEW PERMIT WILL BE REQUIRED PRIOR TO ANY CHANGE OR ADDITION. THE APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS FROM FEDERAL AND STATE AGENCIES, SAMPSON COUNTY ENVIRONMENTAL HEALTH, AND SAMPSON COUNTY INSPECTIONS AS APPLICABLE.