PO Box 759
635 East Street
Pittsboro, N.C. 27312

(919) 542-4621
FAX (919) 542-7109

ZONING COMPLIANCE CERTIFICATE

Applicants Information

Date: ___/___/___

Name: _____ Phone # _____

Property E-911 Address _____ Property Tax Id _____

If in Subdivision: _____ Lot # _____

Restrictive Convents: Y or N

Use Code: _____ In Town ___ETJ___ Watershed Class: IV or V

Maximum Impervious Calculation: _____24% or 36% max

Flood Zone Map# 370420.000A Is Property in Flood Zone or adjacent to: Y or N

Contractor Information:

Name _____ Phone # _____

Address _____

Dimensional Requirements and Information

Attach Copy of Site Plan & Well/Septic permit if applicable

Zoning District: _____

	Proposed	Minimum
Lot Size	_____	_____
Road Frontage	_____	_____
Property Line Setbacks		
Front	_____	_____
Rear	_____	_____
Side	_____	_____
Building Height:	_____	35' max.

Number of Bedrooms: ____

	water	sewer
Access Fee:	_____	_____
Cap Recovery:	_____	_____

Additional Water/Sewer Charges: _____

Comments: _____

Applicants Signature and Acknowledgements

I certify that I am making application for the landowner or myself and that the statements given are accurate and true. Any change in the land use or modifications to the site plan will require additional review by the Town of Pittsboro. It is my further understanding that I must abide by all Town of Pittsboro Ordinances in the use and or construction of the project for which this application has been made.

Applicant: _____ Date: ___/___/___

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_____ Approved

_____ Denied

Town of Pittsboro _____ Date: ___/___/___

Fees: Zoning Compliance $ _____
Access $ _____
Capital Rec. $ _____
Other $ _____
Total $_____