



**TOWN OF PITTSBORO  
ZONING DISTRICT CHANGE APPLICATION**

P.O. Box 759-635 East Street  
Pittsboro, NC 27312

Telephone (919) 542-4621  
Fax (919) 542-7109

**REZ-** \_\_\_\_\_

I, (We) the undersigned, do hereby respectfully make application and petition the Board of Commissioners of the Town of Pittsboro to amend the Zoning Map of the Town of Pittsboro as hereinafter requested, and in support of this application, the following facts are shown:

**(1) Applicant Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No: (h) \_\_\_\_\_

(w) \_\_\_\_\_

(m) \_\_\_\_\_

Email: \_\_\_\_\_

**(2) Landowner Information (as shown on deed)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No: (h) \_\_\_\_\_

(w) \_\_\_\_\_

(m) \_\_\_\_\_

Email: \_\_\_\_\_

**(3) Property Identification:**

911 Address: \_\_\_\_\_  
\_\_\_\_\_

S.R. Name: \_\_\_\_\_

S.R. Number: \_\_\_\_\_

Acreage: \_\_\_\_\_

Flood map #: \_\_\_\_\_

Flood Zone: \_\_\_\_\_

Map Date (2-07-2007)

Tax Map #: \_\_\_\_\_

Parcel#: \_\_\_\_\_

Deed Book: \_\_\_\_\_ Page: \_\_\_\_\_ Yr: \_\_\_\_\_

Plat Book: \_\_\_\_\_ Page: \_\_\_\_\_

Current Zoning District: \_\_\_\_\_

Watershed District: \_\_\_\_\_

**(4) Requested Zoning District**

\_\_\_\_\_

**(5) Attach the following, if requesting a zoning map amendment:**

- List of names and addresses or current adjoining property owners.
- Written legal description, County Tax Map, or Map of the property at a scale of not less than 1 inch equals 200 feet.
- Explanation of request addressing applicable portions of Zoning Ordinance. (Use a separate sheet of paper if necessary.)

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I hereby certify that I am the owner or authorized agent of said property and that the information provided is complete and the statements given are true to the best of my knowledge.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**The owner must sign the following if someone other than the owner is making the application.**

I hereby certify that \_\_\_\_\_ is an authorized agent for said property and is permitted by me to file this application.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Fee \$350.00

Paid \_\_\_\_\_  
Date