

**TOWN OF PITTSBORO
ZONING COMPLIANCE CERTIFICATE APPLICATION
SINGLE FAMILY RESIDENTIAL**



Office Use Only: ZCC- _____ - _____ Parcel #: _____ OpenGov #: _____

Applicant Information:

Name _____
 Address _____

 Email _____
 Best Contact Phone # _____

Landowner Information if different from applicant:

Name _____
 Address _____

 Email _____
 Best Contact Phone # _____

PROJECT INFORMATION

Property Physical Address:	_____		
Subdivision <i>if applicable</i> :	_____	Phase: _____	Lot # _____
Existing dwellings/structures?	Y / N	If yes, how many? _____	Type(s) of structure(s): _____
If yes above:	Is structure to be removed? Y / N		If yes, when? _____

STRUCTURE / SITE INFORMATION
****SITE/PLOT PLAN REQUIRED****

Proposed work:	_____		
Square footage:	Total Heated _____ + Total Unheated _____ = Total SF _____		
Building Height (ft):	#Stories _____	#Bedrooms _____	#Full Baths _____ #1/2 Baths _____
Select a choice from each:	Public Sewer or Septic		Public Water or Well
Proposed Setbacks (ft):	Front: _____ Side 1: _____ Side 2: _____ Rear: _____		

Fee for application is \$75. Pittsboro Planning only accepts payment via check. Please make the check out to Town of Pittsboro.

SIGNATURE BLOCK

I certify that if any of the above information and any information shown on the attached site plan changes, that minimum requirements per the Town of Pittsboro UDO will be met.

_____ Printed Name _____ Signature _____ Date

OFFICE USE ONLY

Zoning District	_____	Town or ETJ	Existing Impervious %: _____	Proposed Impervious %: _____
Minimum setbacks:	Front: _____ Corner <i>if applicable</i> : _____ Sides: _____ Rear: _____			
Flood Information:	Map #: _____	Map date: _____	Zone: _____	
Comments:	_____			

Staff Signature: _____ Date: _____