



Special Use Permit Application

Planning Department
55 N. Broad Street W.
P.O. Box 278, Angier, NC 27501
Phone: (919) 639-2071 Fax: (919) 639-6130

Total Fee: \$500.00

Receipt: _____

Permit: _____

Date: _____

Case #: _____

Applicant Information

Owner of Record:

Name: _____
Address: _____
City/State/Zip: _____
E-mail: _____
Phone: _____

Applicant:

Name: _____
Address: _____
City/State/Zip: _____
E-mail: _____
Phone: _____

Property Description

PIN(s): _____ Acreage: _____ acres

Address/SR No.: _____

Directions from Town Hall: _____

Deed Book: _____ Page: _____ Plat Book: _____ Page: _____

Zoning District: _____ Township: _____

Flood Plain & Panel: _____ Watershed Dist: _____

Water: Public Private (Well) Sewer: Public Private (Septic Tank)

Requested Use:

Special Use for: _____

Required Information: (Applications will not be accepted without this information)

1. Is an Erosion and Sedimentation Control Plan required? No Yes
If yes, is one on file? No Yes (Please attach a copy to your application)
2. It is recommended that all non-residential developments have preliminary discussions with NC DOT concerning driveways and other traffic issues for each project. Has this been done? No Yes
Date of Meeting: _____ NCDOT Contact: _____
3. Is a Driveway Permit required? No Yes
If yes, is one on file? No Yes (Please attach a copy to your application)
4. Have you contacted applicable local, state, and federal agencies regarding building, fire, and other possible code compliance issues? No Yes

Sketch Plan Required: Provide a sketch plan along with application. It is *strongly encouraged* that sketch plans be prepared by a NC Professional Land Surveyor and that it meet the following (as applicable):

Name of Project & Date (Including all Revision Dates)	<input type="checkbox"/>
Applicant/Owner(s) Contact Information (Name, Address, & Phone)	<input type="checkbox"/>
Surveyor/Engineer Contact Information (Name, Address, & Phone)	<input type="checkbox"/>
Parcel ID Number/Tax ID of Tract(s)	<input type="checkbox"/>
Deed Reference of Tract(s)	<input type="checkbox"/>
Zoning Classification of Tract(s)	<input type="checkbox"/>
Location (Including Township, County, & State)	<input type="checkbox"/>
Flood Plain Depicted & Noted (Zone, Map Number, & Effective Date)	<input type="checkbox"/>
Watershed District Noted & Extent of Coverage Depicted	<input type="checkbox"/>
Map Size 22" x 34" & Scale 1"=100' or Larger	<input type="checkbox"/>
North Point, Graphic Scale, & Vicinity Map	<input type="checkbox"/>
Name(s) & Location(s) of Adjacent Property Owner(s) & Use(s)	<input type="checkbox"/>
Existing Boundaries of Tract(s) Showing Bearings & Distances	<input type="checkbox"/>
Gross Acreage of Development	<input type="checkbox"/>
Name(s) & Right(s)-of-way of Streets & State Road Number(s), Including Notation of Public or Private	<input type="checkbox"/>
Name, Location, Width, & Acreage of Additional Easement(s) & Right(s)-of-way Within or Adjacent to Site	<input type="checkbox"/>
Building Envelope & Required Setbacks	<input type="checkbox"/>
Existing & Proposed Utilities	<input type="checkbox"/>
Signage Location, Easement, Type, & Size	<input type="checkbox"/>
Existing Structure(s) Located on Site	<input type="checkbox"/>
Fire Hydrant(s) & Street Light(s) Noted	<input type="checkbox"/>
Erosion Control Plan Submitted	<input type="checkbox"/>
Hours & Days of Operation	<input type="checkbox"/>
Impervious Surface (% Coverage of Lot)	<input type="checkbox"/>
Hazardous Materials to be Stored on Site	<input type="checkbox"/>
Existing & Proposed Mechanical Areas	<input type="checkbox"/>
Existing & Proposed Trash Containment Areas	<input type="checkbox"/>
Existing & Proposed Utility Areas	<input type="checkbox"/>
Parking Space Typical	<input type="checkbox"/>
Parking Lot Material	<input type="checkbox"/>
All parking areas on site (Based on Type of Business and/or Sq. Ft.)	<input type="checkbox"/>
Existing & Proposed Fencing, Screening, Gate(s) and/or Dock(s)	<input type="checkbox"/>
Spillage & Pollution Prevention & Response Methods	<input type="checkbox"/>
Buffering Regulations (Per Town of Angier Unified Development Ordinance)	<input type="checkbox"/>

Signatures

I, as the landowner, hereby CERTIFY that the information contained herein is true to the best of my knowledge; and by accepting this Special Use Permit (if approved) shall in every respect conform to the terms of this application and to the provisions of the Statutes and Ordinances regulating development in the Town of Angier and its ETJ. Any VIOLATION of the terms above stated immediately REVOKES this Permit. I further understand this structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued. This Permit expires 12 months (1 year) after the date the Permit is granted by the Town of Angier Board of Adjustment unless proper permits are obtained within this 12 month period.

Property Owner Signature

Date

Written Statement

*** Applicant is required to answer the following questions under oath at the Board of Adjustment Meeting – Please print answers ***

Public Convenience & Welfare

1. Why are you requesting this use?
2. How will this use benefit the citizens of the Town of Angier?

On-site & Surrounding Land Uses

3. How will the use you are requesting affect the surrounding properties, residents and businesses in the area? Describe in detail **why and how** it will or will not affect the surrounding areas?

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Utilities, Access Roads, Drainage, etc...

4. Describe the driveway (width and surface) that you will be using to enter and exit the property.
5. Describe the drainage of this property.
6. How is your trash and garbage going to get to the landfill?

Traffic

7. Describe the traffic conditions and sight distances at the road that serves the property.
8. What is the approximate distance between your driveway and the next nearest driveway or intersection?

General

9. How many employees will this development employ?
10. What is the estimated investment of the development?
11. What experience do you have in the proposed field?

Conditions

12. State any conditions that you would be willing to consider as part of the approved Special Use Permit.

13. Additional comments the Board should consider in reviewing your application:

Action by the Board of Adjustment

The Board of Adjustment shall approve, modify, or deny the Application for Special Use Permit following the Public Hearing. In granting a Special Use Permit, the Board of Adjustment shall make written findings that the applicable regulations of the district in which it is located are fulfilled. With due regard to the nature and state of all adjacent structures and uses, the district within which it is located and official plans for future development, the Board of Adjustment shall also make written findings that the following provisions are fulfilled:

- A. The requested use **will / will not** impair the integrity or character of the surrounding or adjoining districts;
- B. The requested use **will / will** not be detrimental to the health, morals or welfare;
- C. Adequate utilities, access streets, drainage, sanitation and/or other necessary facilities **have / have not** been made or are being provided;
- D. That adequate measures **have / have not** been or will be taken to provide ingress and egress so designed as to minimize traffic congestion in the public streets; and
- E. That the Special Use **shall / shall not**, in all other respects, conform to the applicable regulations of the district in which it is located, except as such regulations may, in each instance, be modified by the Board of Adjustment .

Note: I/We, the undersigned, do hereby make application and petition to the Board of Commissioners of the Town of Angier to approve the subject Special Use Permit. I hereby certify that I have full legal right to request such action and that the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material and all attachments become official records of the Planning Department of the Town of Angier, North Carolina, and will not be returned.

Print Name

Signature of Applicant

Date