



**Zoning Administration  
Town of Pembroke, North Carolina**

Application #: \_\_\_\_\_

**Application for Special Use Permit**

(Application Must Be Submitted to the Zoning Administrator Thirty (30) Days Prior to Town Council Meeting Date.)

**Date:** \_\_\_\_\_

**Application Fee:** \$ \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

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

**Owner:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

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

**Zoning District:** \_\_\_\_\_

**Parcel Number:** \_\_\_\_\_

**Property Address:**

**Proposed Uses:**

**Application is Submitted Pursuant to Pembroke Zoning Ordinance Section:** \_\_\_\_\_

**NOTE:** The Town Council cannot approve an application for a special use permit, unless each of the findings on the next page is made. It is the responsibility of the applicant to provide competent, material, substantial evidence to support each of the findings. The Zoning Administrator will provide available information about conformance with plans, public health, safety and welfare matters and compliance with regulations. Additional research and preparation of competent, material, and substantial evidence, which may be required to determine such things as traffic impacts and impacts on contiguous properties, are the responsibilities of the applicant.

All information and plans to support either a preliminary or final application must be submitted with this application to the Zoning Administrator at least thirty (30) days prior to the next Town Council meeting. Applicants should be prepared to enter all evidence into the record during the Town Council meeting at which the application is considered.

**Provide competent, material, substantial evidence to make each of the following findings:**

- 1. That the use or development is located, designed and proposed to be operated so as to maintain public health, safety and general welfare;**
  
- 2. That the use or development complies with all required regulations and standards and with all other applicable regulations;**



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- 3. That the use or development is located, designed and proposed to be operated so as to maintain or enhance the value of contiguous property, or that the use or development is a public necessity; and
  
- 4. That the use or development conforms with the general plans for land use and development of the Town of Pembroke as embodied in the Code of Ordinances of the Town of Pembroke and other general development and use plans as adopted by the Town.

**Proposed Conditions:**

**Fee Paid:** \$ \_\_\_\_\_

**Date:** \_\_\_\_\_

I certify that I, the applicant, have the consent of the owner of the property identified in this application and am fully authorized to act on the owner's behalf in applying for this permit. I agree that this permit, if approved, is issued on the presentation made herein and may be revoked because of material departure from the presentation made herein or violations of conditions made a part of this application. It is further agreed and acknowledged that if this special use permit is approved, the property identified in this application will be bound perpetually to the uses and conditions stated in the approved application. It is also understood and acknowledged that any development plans to be submitted pursuant to any special use permit shall be submitted to the Zoning Administrator for review.

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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Received by Zoning Administrator: \_\_\_\_\_

Reviewed by Zoning Administrator: \_\_\_\_\_

Property Owner Notified: \_\_\_\_\_

Property Posted: \_\_\_\_\_

Date Public Hearing Scheduled: \_\_\_\_\_

Time: \_\_\_\_\_

Date Public Hearing Advertised: \_\_\_\_\_

**SPECIAL USE PERMIT**

**APPROVED:** \_\_\_\_\_

**DENIED:** \_\_\_\_\_

Approved with the following conditions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Denied for the following reasons: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

\_\_\_\_\_  
**MAYOR, PEMBROKE TOWN COUNCIL**