Wake County Environmental Services Improvement Permit Application

	•		'	•			
Section 1 Please complete to	he following information:						
Applicant (if different than owner)	Street Address		City	Zip Code	Telephone Number Day	FAX	
Owner	Street Address		City	Zip Code	Telephone Number Day	FAX	
				•			
Section 2 Please answer the following questions as accurately as possible. After completing this section, please return this form and your site plan to the zoning officer for approval.							
TYPE OF FACILITY:							
() Single Family Dwelling	() Mobile Home	() Multi-Family Dwelling () Business					
# Bedrooms	# Bedrooms	-	# Units # Employees per day				
# Other rooms w/closets	# Other rooms w/closets # Other rooms w/closets # Bedrooms per unit Type of Business # Other rooms w/closets Waste-water: () Domestic						
			# Other	ooms welose		ck one () Industrial	
() Other <i>Please Specify</i> () Existing Structure	() Renovation	()	Addition		() Basement		
_	. ,				. ,		
() GARBAGE DISPOSAL	WATER SUPPLY S	SOURCE: () Private	() Public	c () Share Well	() Community	
I certify that all of the statements made in this application and on any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understant that false information may be grounds for rejection of this application. <i>Authorized Environmental Services representatives are granted</i>							
right of entry to make evaluations or					rizea Environmentai Services	<u>representatives are grantea</u>	
Sign	ature of Owner or Authorized Agent				Date		
g d 2 govryg p							
Section 3: ZONING DA	ATA The following inform	nation will be	filled out by	the zoning	officer.		
Please Check One: PROPERTY I			(UNRECOR				
Wastewater:	() Individual	() C	ommunity	() Publi	c		
			(SUBD	IVISION ADMIN	IISTRATION STAFF)	(DATE)	
APPLICATION FOR: Improver	nents Permit Grading Permit Sp (Circle One)	pecial Use Subd	livision Approva	l Other	PROPOSED US		
	(Circle Olle)					(Please Specify)	
			Tax Ma	p	Parcel		
TOWNSHIP	JURSIDICTION		ZONING		PIN#		
						FLOODPLAIN ()	
SUBDIVISION	LOT#	SECTION #	ACRES		LOCATION/ADDRESS	Y/N	
The proposed land use is not pe unless the Environmental Service					ninimum zoning requirem	ents must be met,	
directs the Environmental Service	ses Beparement requires in	ore raine area	or other qua	inications.			
LOT AREA SQ. FT.	FRONT YARD	FT.	CORNI	ER YARD	FT.		
LOT WIDTH FT.	SIDE YARD	FT.	REAR	YARD	FT.		
OTHER TOWN REQUIREMENTS: () I	BUILDING PERMIT () SPECIA	AL USE PERMIT	() OTHE	₹			
Signature of Authorized Zoning Officer			Date				
Pacaint #	Amt Paid	Initiale					

DIRECTIONS: Please write directions to property on back of form.