



TOWN OF ARCHER LODGE
DEVELOPMENT PERMIT APPLICATION

Permit #: _____
Fee: \$ _____; Receipt No. _____
Payment Method: Ck# _____
Cash: ___ Other: ___ Pay Date: _____
Application Received: _____



1. Check Applicable Type of Permit(s) and Use:

[] Zoning Compliance Permit [] Watershed Protection Permit [] Floodplain Development Permit

[] New Construction – Single Family (stick built/modular) [] Double Wide Manufactured Home – Year: _____
[] Structural Addition/Modification [] Single Wide Manufactured Home – Year: _____
[] Accessory Use (i.e., deck, shed) Dimensions: _____ [] Other: _____

2. Proposed building/structure square footage: _____; Stories: _____; and height (measured in ft. from average grade to peak of roof/structure: _____: Proposed use: _____; Cost of Construction: _____

3. Property Owner: _____ Phone: _____
Address: _____ Email: _____

4. Applicant/Agent: _____ Phone: _____
Address: _____ Email: _____

5. Site Address: _____ Subdivision: _____

6. Site PIN# _____ or Tax Tag ID # _____ Lot size (acreage): _____

7. Utilities (check all that apply): County Water: ___; Well: ___; County Sewer: ___; Septic: ___

8. Please include the following information with the application:

- > Site Plan, drawn to scale, showing buildings - principle use and accessory (existing and proposed), driveway/sidewalks, and impervious surface area (in sq. ft.) on the lot (existing a proposed), easements, flood plain, streams and buffers.
> Copy of Johnston County Improvement Permit if the lot is served by a septic system.
> Copy of Property Deed; and, if you are not the property owner applying for the permit, the property owner must give you written consent to apply for the permit. (A blank consent for is included in the application material on page 3.)
> Other: _____

Note: Additional information, including property survey, may be required upon review of the application and attachments to determine compliance ordinance provisions.

Contact the Town Planner if you have any questions regarding the above at 919.359.9727 or e-mail julie.maybee@archerlodgenc.gov. Ordinance provisions can be viewed on the Towns website: https://www.archerlodgenc.gov/planning-zoning

9. Applicants Certification: I certify that all the statements made in this application and any attached documentation are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may result in the rejection of this permit or subsequent revocation of this permit. Authorized town officials are granted right of entry to make evaluations or inspections as to compliance and to release information upon public request. I understand that additional State and County permits may be required prior to occupancy of requested use. I further understand that a Zoning Certificate of Compliance shall be required and issued by the Town of Archer Lodge prior to the occupancy and/or commencement of operations of the proposed use.

Print Name

Signature of Applicant

Date

**TOWN OF ARCHER LODGE
DEVELOPMENT PERMIT APPLICATION**

Permit # _____ **Site Address:** _____

This permit is issued pursuant to information contained herein and provided by the owner and/or agent. Information determined to be false or failure to comply with all appropriate Statutes, Codes, and Regulations may result in the revocation of this permit. A ZONING COMPLIANCE PERMIT WILL EXPIRE WITHIN 12 MONTHS IF THE USE, CONSTRUCTION, OR ACTIVITY AUTHORIZED BY APPROVAL OF THIS APPLICATION IS NOT STARTED UNLESS AN EXTENSION IS AUTHORIZED.

Special Requirements/Conditions: (1) Any deviation from the approved permit, including site plan, must be approved in writing by the Town Planner prior to change; (2) Call or e-mail the Town Planner for a final zoning inspection when the permitted work is complete; (3) Maximum Impervious surface area per lot is: _____; (4) Other: _____

Approval: _____ - See Special Requirements/Conditions Above; Denial: _____ - Reasons: _____

Signature of Town Official

Date:

AGENT AUTHORIZATION / OWNER'S CONSENT FORM

AGENT/APPLICANT INFORMATION:

(Name)

(Address)

(City, State, Zip)

I hereby give CONSENT to the above referenced agent/applicant to act on my behalf, to submit applications and all required materials and documents.

Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application.

I hereby certify that I have authority to execute this consent form as/on behalf of the property owner. I understand that any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I further agree to all terms and conditions which may be imposed as part of the approval of this application.

OWNER AUTHORIZATION:

Name

Address

City, State, Zip

Owner's Signature

Date

OFFICIAL USE – STAFF ANALYSIS

Permit #: _____ Zoning District: _____ Lot Size: _____

Application Received on: _____ Application Complete? Y/N

Associated Subdivision/Project Approval(s): _____

Flood Zone: _____ FIRM Map/Panel: _____

Special Flood Hazard Area: Yes No Permit required? Y/N

Water Supply Watershed Protection District: Yes No Permit required?
Y/N

Utility Services: Public Water Well Public Sewer Septic System

Is Structure in the Right-of-Way of any of the following (check all that apply):

Utilities Easement NCDOT ROAD or Other Road or sight triangle Proposed Thoroughfare/Shared Use Path None

| | Required | Provided |
|---------------------------------|----------|----------|
| Lot Area | | |
| % of Impervious Surface | | |
| Lot Width | | |
| Setbacks | | |
| Front | | |
| Side | | |
| Rear | | |
| Max Building Height - Principal | | |
| Max Building Height - Accessory | | |
| Accessory Building Setbacks | | |

Comments:
