

Application Date: _____

Application #: _____

Craven County

Planning and Inspections
2828 Neuse Blvd.
New Bern, NC 28562
Planning (252) 636-6618, fax (252) 636-5190
Inspections (252) 636-4987, fax (252) 636-4984

<p>Office Use Only</p> <p>\$150 fee paid? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Postage fees paid? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Amount paid for postage_____</p>
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SPECIAL USE ZONING PERMIT

Submit with General Information Sheet

Applicant hereby requests special use zoning permit for the following address:

Address: _____ Parcel ID: _____ - _____ - _____

Current Zoning Designation: _____

Current Land Use: _____

Proposed Use: _____

The special use permit, if approved, shall include approval of plans as may be required. In approving the permit, the Board of Adjustment and Planning Board shall find as a specific finding of fact and reflect in their minutes that the permit will comply with the following four facts. Please use the spaces provided to explain how the proposed use will comply:

1. The use will not materially endanger the public health, safety, or general welfare if located where proposed and developed according to the plan as submitted and approved.

2. The use meets all required conditions and specification.

3. The use will not adversely affect the use or any physical attribute of adjoining or abutting property, or that the use is a public necessity.

4. The location and character of the use, if developed according to the plan as submitted and approved, will be in harmony with the area in which it is to be located. The special use shall demonstrate conformance to the Land Use Plan in effect at the time and address impacts of the project as required by North Carolina General Statutes.

The following information must be submitted along with this application:

1. **Site Plan**- Must be at a scale of 1"=100' showing the location of all structures and lighting. Plans must show: location of structures and the height of all structures above mean sea level, lighting plan (including wattage, illumination and location), description of exterior construction materials for all structures.
2. **Airport Certification**- Certification from the Craven Regional Airport Manager or its designee that the proposed use does not propose a hazard to safe operation of the airport or aviation. This may include and be based on consultation with the United States Federal Aviation Administration.
3. **Other Requirements**- The Planning Board and Board of Commissioners may provide additional requirements as it deems necessary in order to make the proposed project more compatible with adjacent areas and existing or proposed traffic patterns.

This application and all accompanying plans shall be submitted to the Zoning Administrator at least three weeks prior to the regularly scheduled Planning Board meeting. If permits are granted, I agree to conform to all applicable ordinances and laws of Craven County, the State of North Carolina, and applicable federal regulations that apply to the specifications or plans submitted for review. I certify that the information contained herein is accurate and correct to the best of my knowledge.

Owner/Applicant Signature _____ **Date** _____

Office Use Only-Zoning Administrator

Special use permit approved? **Yes** **No**

Misc. Remarks: _____

Zoning Adm. Signature: _____ **Date:** _____