

TOWN OF BOLIVIA

PO Box 93, BOLIVIA, NORTH CAROLINA, 28422

PHONE: (910) 253-5303

FAX: (910) 253-8066

ZONING COMPLIANCE PERMIT

APPLICANT:	MAILING ADDRESS:	PHONE #
OWNER:	ADDRESS:	PHONE #
PROPERTY ADDRESS:	LOT SIZE:	FLOOD HAZARD AREA:
	ZONING DISTRICT:	Y N
REQUEST PERMIT TO:		
COMPLETE REQUIRED INFORMATION ATTACHED. INCOMPLETE INFORMATION WILL VOID THIS APPLICATION.		

CERTIFICATION:

I CERTIFY THAT I AM AUTHORIZED TO MAKE THIS APPLICATION, THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE, THAT I AM AUTHORIZED TO GRANT AND DO GRANT PERMISSION TO THE LOCAL ZONING OFFICIAL AND LOCAL BUILDING OFFICIAL TO ENTER ON THE PROPERTY DESCRIBED ABOVE FOR THE PURPOSE OF INSPECTION.

SIGNED: _____ DATE _____

FOR TOWN OF BOLIVIA USE ONLY:

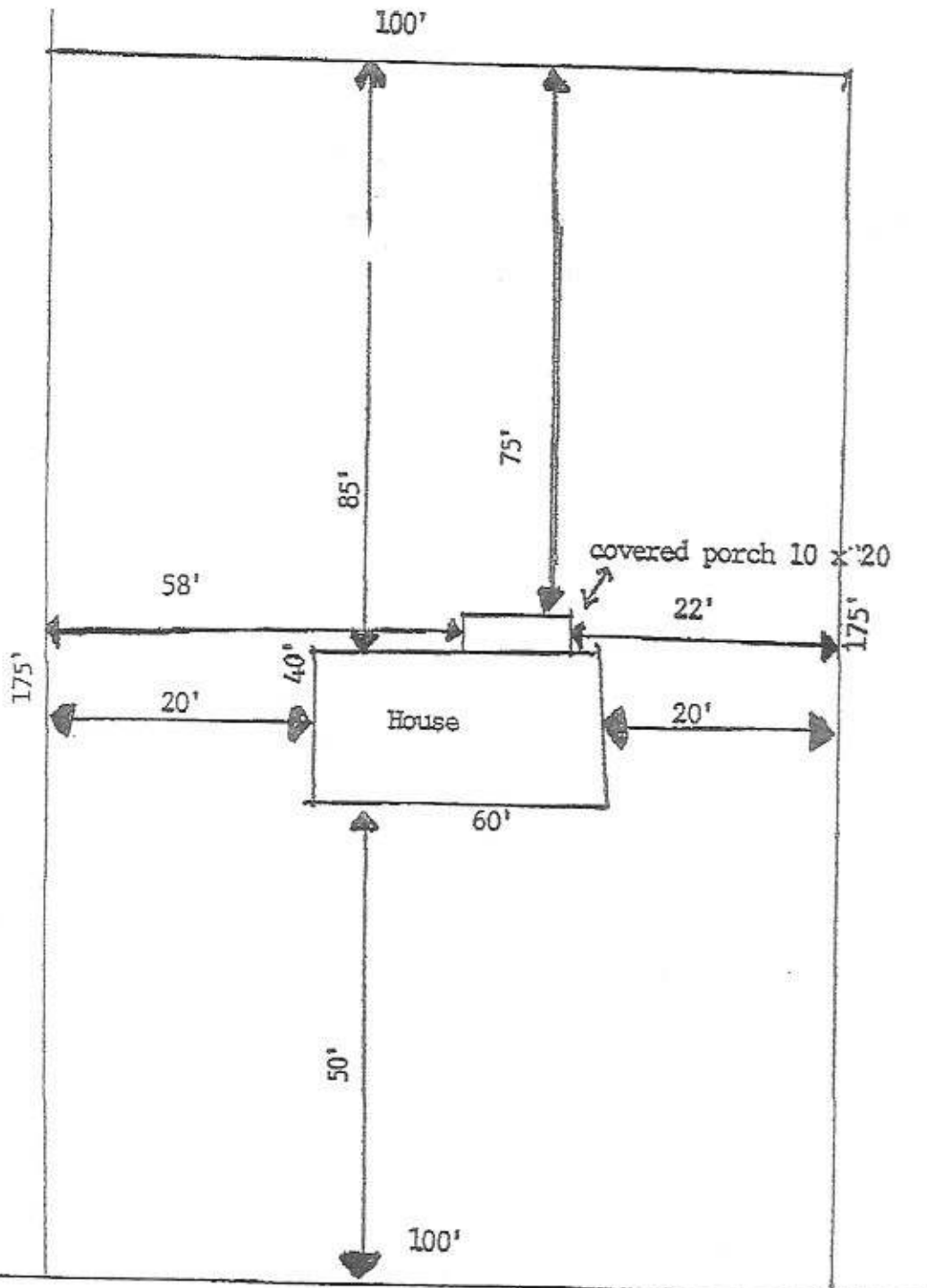
PERMIT NUMBER:	DATE PERMIT ISSUED:
SPECIAL CONDITIONS:	
REQUIRED SETBACKS: FRONT SIDE REAR	NUMBER PARKING SPACES REQ'D:

THIS PERMIT IS APPROVED PER CONDITIONS OF THE TOWN OF BOLIVIA ZONING ORDINANCE AND/OR BOARD OF ALDERMEN ACTION OF _____

ZONING OFFICIAL SIGNATURE

DATE

SAMPLE SITE PLAN



Maple Street

Height 30' Lot Number 72