



Mayor Bill Braswell

Town Commissioners  
Gary Hamill  
Johnny Lowery  
John Mangum  
Brent Moser  
Peggy Taylor

P.O. BOX 367 • Wingate NC 28174 • TEL: (704) 233-4411 • FAX: (704) 233-4412

## Zoning Permit Application

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

### Applicant Information

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

### Property Owner Information

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### Property Information

Street Address: \_\_\_\_\_ Tax Parcel Number: \_\_\_\_\_

- Current Zoning: (check one)
- |                              |                              |                                |                                |
|------------------------------|------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> R-6 | <input type="checkbox"/> R-8 | <input type="checkbox"/> R-10  | <input type="checkbox"/> R-20  |
| <input type="checkbox"/> B-1 | <input type="checkbox"/> B-2 | <input type="checkbox"/> B-3   | <input type="checkbox"/> B-6   |
| <input type="checkbox"/> LI  | <input type="checkbox"/> HC  | <input type="checkbox"/> RA-20 | <input type="checkbox"/> RA-40 |

How many square feet is the property? \_\_\_\_\_

What is the gross floor area of the proposed building(s)? \_\_\_\_\_

Describe the proposed building and use: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





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**Attach a copy of the site design that includes the following items:**

- Name of the applicant
- Existing buildings, structures, and signs (including dimensions of each)
- Property lines (with dimensions identified)
- Street and street right-of-way lines
- Utility or other easement lines
- The location and dimensions of all proposed buildings and free-standing signs on the lot as well as the distances of all proposed buildings and free-standing signs from the property lines, streets, and street right-of-way lines.

I hereby certify that the above information is, to the best of my knowledge, true and correct. I understand that incorrect or missing information may cause a delay in the issuance of a zoning permit, a denial of a zoning permit, or the revocation of a zoning permit that has been issued as a result of the information included in this application. I further agree to provide the Land Use Administrator with any additional information that may be required to show compliance with the Wingate Land Use Ordinance.

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

**OFFICE USE ONLY**

**Date Application Received:** \_\_\_\_\_

**Application Received By:** \_\_\_\_\_ **Fee Paid:** \_\_\_\_\_

**Application Reviewed By:** \_\_\_\_\_

**Additional Information Required:**  Yes \_\_\_\_\_  
 No

**Application:**  Approved **Zoning Permit #:** \_\_\_\_\_

Denied **Reason:** \_\_\_\_\_

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

