

A pre-application conference with the Community Development Office is required before submitting this application. Conferences can be scheduled with the Planning Director at 919-764-1016 or planning@cityofcreedmoor.org

I (We) the undersigned, do hereby respectfully make application to the City of Creedmoor Community Development Director for approval. In support of this application, the following facts are shown:

PROJECT NAME: _____

Type of Development:

Subdivisions:

- Major Subdivision (5+ lots)
 - Sketch Plan
 - Preliminary Plat
 - Final Plat
- Minor Subdivision (4 lots or less)

Site Plans:

- Large Site Plan Review
 - Sketch Plan
 - Site Plan Review
- Standard Site Plan Review

Exempt plats:

- Conveyance Plat
- Recombination
- Other Exempt Plat

Applicant Information

Name _____ Phone _____

Mailing Address _____

Email Address _____

Property Owner Information (if different from applicant)

Name _____ Phone _____

Mailing Address _____

Email Address _____

Description of Parcel

Property Address: _____

Tax Map ID/PIN # _____

Deed Bk/Pg Reference _____

Is property within 100-year Floodplain? Yes No

Zoning District _____

City Limits Extraterritorial Jurisdiction (ETJ)

Complete this section for Subdivisions only:

Overall acreage to be subdivided: _____

Number of existing lots: _____

Number of proposed lots in subdivision: _____

Complete this section for Site Plans only:

Existing Use: _____

Proposed Use: _____

Please briefly describe any known conditions (i.e. easements, covenants, floodplains, etc.) on the property that would need to be remedied or that could potentially prevent the development of this site: _____

I (WE) THE UNDERSIGNED HEREBY CERTIFY that all the information contained herein is correct and true to the best of my knowledge. I agree to have the subject development conform to the provisions of the Statutes and Ordinances regulating development in the City of Creedmoor, Granville County and the State of North Carolina.

Applicant's Signature: _____ Date: _____

Landowner's Signature: _____ Date: _____

Internal Use Only

Case #: _____ Date Filed/Fee Paid: _____

Fee Calculation: _____

Authorized Signature: _____ Date of Approval: _____

Comments: _____
