



Zoning Permit Application

Fee: \$50.00	Date Received: _____	Permit #: _____
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Applicant: _____ Phone: _____

Property Owner(s): _____

Property Address: _____ Type of Structure: _____

LRK: _____ Zoning District: _____

Applicant's Mailing Address: _____

Applicant's Email Address: _____

A site plan showing the location of the structure and the distance from all property lines must be submitted with this application.

Date: _____

Signature of Applicant

APPROVED:

Date: _____

Town of Southern Pines Zoning Official

**PLANNING DEPARTMENT
TOWN OF SOUTHERN PINES
801 SE Service Road, Southern Pines, NC 28387
plan@southernpines.net (910) 692-4003 www.southernpines.net**