

**CITY OF DUNN**  
Zoning Compliance Form

Please attach a plot plan showing lot lines and dimensions the location and size of all existing and proposed buildings the distance from each building to property lines all driveway entrances parking and loading areas all existing landscaping (generally)

**TO BE COMPLETED BY THE PROPERTY OWNER**

Property Identification Information

Applicant's Name William Elmore  
 Applicant's Contact Telephone Number (Area Code) 919 828 3001  
 Property Address (Please include City, State, and Zip Code) 111 Carroll Byrd Lane  
Dunn, NC 28334  
 County PIN 1515 57 28A 000  
 Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_  
 Phase \_\_\_\_\_  
 Property Owner Name Danny McLamb + Crystal Stanley  
 Property Owner Address (Please include City, State and Zip Code) 111 Carroll Byrd Lane  
Dunn, NC 28334  
 Dimensions of Property  
 Width \_\_\_\_\_ Depth \_\_\_\_\_  
 Square Feet \_\_\_\_\_ Acreage A4  
 Property Owner Contact Telephone Number ( ) \_\_\_\_\_

Current Use of the Property

- Residential  
 Commercial  
 Office  
 Other

Name of Business \_\_\_\_\_  
 # of Square Feet \_\_\_\_\_  
 Name of Business \_\_\_\_\_  
 # of Square Feet \_\_\_\_\_  
 Name of Business \_\_\_\_\_  
 # of Square Feet \_\_\_\_\_

Proposed Use of the Property

- Residential  
 Commercial  
 Office  
 Other

Name of Business \_\_\_\_\_  
 # of Square Feet \_\_\_\_\_

Name of Business \_\_\_\_\_  
 # of Square Feet \_\_\_\_\_

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Existing Building(s)

Vacant Land

Building One  
Width \_\_\_\_\_  
Depth \_\_\_\_\_  
Current Use \_\_\_\_\_

Building Two  
Width \_\_\_\_\_  
Depth \_\_\_\_\_  
Current Use \_\_\_\_\_

Building Three  
Width \_\_\_\_\_  
Depth \_\_\_\_\_  
Current Use \_\_\_\_\_

Parking Spaces

Number spaces provided \_\_\_\_\_

Proposed Project

New Construction

Use of Existing Structure

Modification of Existing Structure

Addition to Existing Structure

Additional Building

Dimensions of new construction \_\_\_\_\_

Connection to Utilities

Electricity

Public Water

Public Sewer

Storm Water System

Natural Gas

Square feet of new construction \_\_\_\_\_

Private Well

Private Septic System

Owner Certification

I hereby certify that I am the owner of the above identified property that the information shown above and shown on the attached plot plan is correct and complete to the best of my knowledge I understand that all decisions rendered will be based on and enforced according to this information I understand that this permit if granted is issued on the basis of the information supplied by the owner and that this permit may be revoked in the event of any breach of representation or conditions

Property Owner Signature \_\_\_\_\_

**TO BE COMPLETED BY THE ZONING OFFICIAL**

Zoning Classification

R-20  
Required Lot Size 20,000 sq ft  
Required Front Yard Set Back 30 ft  
Required Rear Yard Set Back 25 ft  
Required Side Yard Set Back 10 ft

Special Conditions

Septic Approval Only

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Reason \_\_\_\_\_

Signature \_\_\_\_\_

James H. Day  
Zoning Administrator

Date \_\_\_\_\_

9-7-11

Amount \_\_\_\_\_

Receipt Number \_\_\_\_\_

Floodplain Determination

Property is not located in a floodplain  
 Property is located in floodplain but development is not  
 Development is located in a designated flood hazard area

Panel Number \_\_\_\_\_ Date of Panel \_\_\_\_\_

Parking Spaces

Required \_\_\_\_\_  
Provided 7