



**GUILFORD COUNTY
PLANNING AND DEVELOPMENT**

Improvement Permit
Application

Building Permit # _____ Septic # _____ Well # _____

Property Information

Address _____ City _____ State _____ Zip _____

Tax Parcel # _____ Township: _____

Development Name: _____

Section/Phase: _____ Lot #: _____ Deed Book: _____ Page: _____ Plat Book: _____ Page: _____

Lot of Record First Lot Out Plat Required > 5 Acres (5-17-65 to 2-1-74) > 10Acres (2-1-74 to Present)

Located in recorded roadway corridor, do not permit. Contact NCDOT

Zoning Information

Zoning: _____ Conditional Zoning (Describe): _____

Overlay (Check): MH SR HD AR FH

Watershed: _____ Watershed Critical Area: _____

Building Setbacks (Zoning): Front Street: _____ Side Street: _____ Side Yard: _____ Rear: _____

Comments: _____

PLANNING DEPARTMENT OFFICIAL: _____

Applicant Information

| | | | |
|----------------|---------|-------|-------|
| Applicant Name | Address | Phone | Email |
|----------------|---------|-------|-------|

| | | | |
|------------|---------|-------|-------|
| Owner Name | Address | Phone | Email |
|------------|---------|-------|-------|

Development Information

NEW ACCESSORY SWMH MULTIFAMILY/DUPLEX ADDITION (TYPE) _____
 HOUSE MODULAR DBMH RENOVATION OTHER TYPE: _____

Residential Specifications: _____ # of Bedrooms _____ Total # of Rooms _____ # of Occupants
_____ Basement (Y or N) _____ Basement Fixtures _____ # of Stories _____ Size of Structure (sq ft) _____

Non Residential Type: Commercial Industrial Other _____
_____ # of Employees _____ # of Fixtures _____ Plumbing _____ # of Stories
_____ Size of Structure (sq ft) Restaurant # of seats: _____ Church w/kitchen _____

Water Information: New Well Existing Well Public Community Well _____

Sewage Disposal: Conventional Chamber Trench Polystyrene Aggregate Low Pressure Pipe
 Lg. Diameter Pipe PTI Multi-pipe Drip Irrigation PPBPS Pre-Treatment

Other (specify) _____

Directions: _____

*** A Plat or Plot Plan must accompany this application. * Clearly stake and flag all property lines, corners and the corners of all structures. ***

I have read this application and certify that the information provided herein is true, complete and correct to the best of my knowledge, and is given in good faith. Authorized County and State Officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules. The owner/applicant is solely responsible for compliance with the applicable governing regulations.

Owner/Applicant Signature

Date