

Town of Godwin

County Planning & Inspections Department

CASE #: _____

PLANNING BOARD
MEETING DATE: _____

DATE APPLICATION
SUBMITTED: _____

RECEIPT #: _____

RECEIVED BY: _____

APPLICATION FOR REZONING REQUEST GODWIN ZONING ORDINANCE

Upon receipt of this application (petition), the County Planning & Inspections Staff will present to the Joint Planning Board the application at a hearing. In accordance with state law and board's policy, the staff will provide notice of the hearing to the appropriate parties and in the proper manner.

The Joint Planning Board will make a recommendation to the Godwin Board of Commissioners concerning the request. The Board of Commissioners will schedule a public hearing and issue a final decision on the matter. Generally, the Commissioners will hold their public hearing in the month following the meeting of the Planning Board. *The zoning district shall not be made effective until the request is heard and received approval by the Board of Commissioners.*

The following items are to be submitted with the completed application:

1. A copy of the recorded deed and/or plat,
2. If a portion of an existing tract is/are being submitted for rezoning, an accurate written legal description of only the area to be considered;
3. A check made payable to the "Cumberland County" in the amount of \$_____ (See attached Fee Schedule)

The County Planning & Inspections Staff will advise on zoning options, inform applicants of development requirements and answer questions regarding the application and rezoning process. For questions, call (910)678-7629 or (910)678-7603. Hours of operation are 8:00 a.m. to 5:00 p.m., Monday through Friday.

NOTE: Any revisions, inaccuracies or errors to the application may cause the case to be delayed and will be scheduled for the next available board meeting according to the board's meeting schedule. Also, the application fee is nonrefundable.

TO THE CUMBERLAND COUNTY JOINT PLANNING BOARD AND THE GODWIN BOARD OF COMMISSIONERS, NC:

I (We), the undersigned, hereby submit this application, and petition the Godwin Board of Commissioners to amend and to change the zoning map of the Town of Godwin as provided for under the provisions of the Godwin Zoning Ordinance. In support of this petition, the following facts are submitted:

1. Requested Rezoning from _____ to _____
2. Address of Property to be Rezoned: _____
3. Location of Property: _____

4. Parcel Identification Number (PIN #) of subject property: _____
(also known as Tax ID Number or Property Tax ID)
5. Acreage: _____ Frontage: _____ Depth: _____
6. Water Provider: _____
7. Sewer Provider: _____
8. Deed Book _____, Page(s) _____, Cumberland County Registry. (Attach copy of deed of subject property as it appears in Registry).
9. Existing use of property: _____
10. Proposed use(s) of the property: _____

11. Do you own any property adjacent to or across the street from the subject property?
Yes _____ No _____ If yes, where? _____
12. Has a violation been issued on this property? Yes _____ No _____

The Planning and Inspections Staff is available for advice on completing this application; however, they are not available for completion of the application.

The undersigned hereby acknowledge that the County Planning & Inspections Staff has conferred with the petitioner or assigns, and the application as submitted is accurate and correct.

Name of Owner(s) (Print or Type)

Address of Owner(s)

Home Telephone #

Work Telephone #

E-Mail

Name of Agent, Attorney, Applicant (Print or Type)

Address of Agent, Attorney, Applicant

E-Mail

Home Telephone #

Work Telephone #

Signature of Owner(s)

Signature of Agent, Attorney or Applicant

Signature of Owner(s)

The contents of this application, upon submission, become “public record.”