



Town of Selma
Planning & Economic Development
114 N. Raiford St.
Selma, NC 27576
P: 919-965-9841
F: 919-965-4637
www.selma-nc.com

ZONING PERMIT APPLICATION -TEMPORARY USE-

Pursuant to Section 17-540 of the Selma Unified Development Code, a temporary use or structure is not permitted without a Zoning Permit. Staff shall review the request to ensure it meets the standards set forth in Section 17-540.

Note: A Town of Selma Temporary Use Permit only demonstrates compliance with the Town of Selma Zoning Ordinance and does not imply compliance with the NC Building Code, Fire Code, NCDOT, or any other applicable agencies. It is the applicant's obligation to seek the appropriate permits.

Application Fee: \$100.00
Fees are due at the time of application submittal and are non-refundable

SITE INFORMATION

Write "N/A" if not applicable. If unsure of the correct information, site data (i.e. zoning districts and overlay districts) may be found on the Johnston County GIS website or by speaking with the Selma Planning staff.

Business Name: _____

Property Address: _____

Johnston County Tag#: _____

Dates of Operation: Start Date: _____ End Date: _____

Hours use/event will take place, if applicable: _____

Detailed Description of Request:

COMPLETED BY STAFF

Date Received: _____ Amount Paid: _____ Permit #: _____

APPLICANT INFORMATION

Owner's Consent Form is required if applicant is not the property owner.

Applicant Name: _____
 Contact Person: _____
 Mailing Address: _____
 Phone Number: _____
 Email Address: _____

Property Owner (if different than applicant):

Name: _____
 Mailing Address: _____
 Phone Number: _____

REQUIRED INFORMATION

The following items must accompany a Zoning Permit application (If not applicable, check "n/a"). Incomplete applications will not be reviewed until all materials have been provided.

<u>Item</u>	<u>Yes</u>	<u>N/A</u>
1. Permit Review Fee	<input type="checkbox"/>	
2. Completed and Signed application	<input type="checkbox"/>	
3. Owner's Consent form (required if applicant is not the property owner)	<input type="checkbox"/>	<input type="checkbox"/>
4. Site Plan (may be hand drawn)	<input type="checkbox"/>	<input type="checkbox"/>

APPLICANT AFFIDAVIT

I, the undersigned, to hereby make application and petition to the Planning Department of the Town of Selma to approve the subject Zoning Permit. I hereby certify that all activities will be carried out in compliance with the Unified Development Code and understand that violations will result in a Code Enforcement action and fine. I further certify that I have full legal right to request such action and that the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material, and all attachments become official records of the Town of Selma and will not be returned.

Print Name

Signature of Applicant

Date



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AGENT AUTHORIZATION / OWNER'S CONSENT FORM

Pursuant to Section 17-602 of the Town of Selma Unified Development Ordinance, written authorization is required from the property owner(s) if an agent will act on their behalf. A separate form is required from each owner. All fields must be completed.

AGENT/APPLICANT INFORMATION:

(Name)	(Address)
	(City, State, Zip)

I hereby give CONSENT to the above referenced agent/applicant to act on my behalf, to submit applications and all required materials and documents, and to attend and represent me at all meetings and public hearings pertaining to the following processes (*list applicable requests*):

Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application.

I hereby certify that I have authority to execute this consent form as/on behalf of the property owner. I understand that any false, inaccurate or incomplete information provided by me or my agent will result in the denial, revocation or administrative withdrawal of this application, request, approval or permits. I further agree to all terms and conditions which may be imposed as part of the approval of this application.

OWNER AUTHORIZATION:

(Name)	(Address)
(Owner's Signature)	(City, State, Zip)