



**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

### Commercial Use Change / Upfit / Tenant

*Pursuant to Section 17-600 of the Selma Unified Development Code, the use made of property may not be substantially changed; substantial clearing, grading, or excavation may not be commenced; and buildings or other substantial structures may not be constructed, erected, moved, or substantially altered except in accordance with and pursuant to issuance of a permit from the Town of Selma.*

**A Zoning 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.**

#### ZONING PERMIT TYPE AND FEE

**Check all that apply. Fees are due at time of submittal and may not be refunded.**  
*Note that any changes to site elements, including change of a building footprint, will require a Site Plan application in lieu of this application.*

Use Change (\$100)     Building Upfit (no site changes) (\$100)     Tenant Change (Information Only)

#### APPLICANT INFORMATION

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

Applicant Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Property Owner (if different than applicant):**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

#### Completed by Staff:

Date Received: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Permit #: \_\_\_\_\_

## 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 (<https://mapclick6.johnstonnc.com/mapclick/MapClick4/>) or by speaking with Selma Planning staff.

Current Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Development or Business Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Johnston County Tag #: \_\_\_\_\_

Lot Size: \_\_\_\_\_

Zoning District: \_\_\_\_\_  City Limits  Extraterritorial Jurisdiction

Description of Request: \_\_\_\_\_

Wastewater Allocation Requested: \_\_\_\_\_

Cost of Construction: \_\_\_\_\_

Is the property located in a Historic District:  No  Yes If Yes, district name: \_\_\_\_\_

Note: Properties in a Historic District are subject to Historic District guidelines pursuant to Section 17-420 of the Unified Development Ordinance, and may require a Certificate of Appropriateness from the Historic Properties Commission.

Utility Services:  City Water  Well  City Sewer  Septic Tank  Gas  Electricity

## 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.

Item	Yes	N/A
1. Permit Review Fee	<input type="checkbox"/>	
2. Completed and signed application	<input type="checkbox"/>	
3. Owner's Consent Form <i>Required if applicant is not the property owner.</i>	<input type="checkbox"/>	<input type="checkbox"/>
4. Verification of received or current Wastewater Allocation <i>Some use changes result in a higher use of water/sewer and require approval by the Public Works Director.</i>	<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

**STAFF ANALYSIS (completed by staff)**

Zoning District: \_\_\_\_\_  City Limits  Extraterritorial Jurisdiction

Lot Size: \_\_\_\_\_

Associated Project Approval Project #(s): \_\_\_\_\_

Flood Zone: \_\_\_\_\_ FIRM Map: \_\_\_\_\_

Associated Special Flood Hazard Area Development Permit #: \_\_\_\_\_

Water Supply Watershed Protection District:  Yes  No Permit required? Y/N

Historic District:  Yes  No

Utility Services:  City Water  Well  City Sewer  Septic Tank  Gas  Electricity

Is Structure in the Right-of-Way of any of the following (check all that apply):

City Utilities  Railroad  NCDOT or City Road  Proposed Thoroughfare  None

	<b>Required</b>	<b>Provided</b>
Lot Area		
% of Impervious Surface		
Lot Width		
<b>Setbacks</b>		
Front		
Side		
Rear		
Max Building Height - Principal		
Max Building Height - Accessory		
Accessory Building Setbacks		

Comments:

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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)