TOWN OF TROUTMAN
ZONING PERMIT APPLICATION AND ZONING PERMIT

Change of Principal Use
New or Enlarged Principal Structure
New or Enlarged Accessory Structure

PERMIT -Z- *DATE OF APPLICATION:* October 2, 2000

APPLICANT'S NAME: Grayson O. Stamey

APPLICANT'S MAILING ADDRESS: 108 Westfield Ctr.
Mooresville, NC 28115

DAY TIME PHONE # (704) 932-6195

PROPERTY LOCATION: 224 Shenandoah Loop, Meadow Glen Sub. Lot #89

TAX MAP OR PARCEL IDENTIFICATION NUMBER (PIN): 4730-48-6343

EXISTING ZONING: R-20 *IN A SPECIAL FLOOD HAZARD AREA? Yes:* *No:* XX

LOT DIMENSIONS: *Length:* 140.23 *Area:* .4224 Ac.
Width: 247.63 *Street Frontage:* 247.63

TYPE OF BUILDING PROPOSED AND/OR PROPOSED USE: Single Family Dwelling

PROPERTY OWNERS'S NAME: C & S Associates

PROPERTY OWNER'S MAILING ADDRESS: 108 Westfield Ctr.
Mooresville, NC 28115

RELATIONSHIP OF APPLICANTS TO PROPERTY OWNER: Self

IF ACCESSORY STRUCTURE, CHECK PROPOSED YARD LOCATION

Front: _____ *Right Side:* _____
Rear: _____ *Left Side:* _____

STRUCTURE REQUIREMENT *(Note: A separate application must be completed for each structure)*

	Required	*Proposed*
Lot Area		
Side Yard, Left		
Side Yard, Right		
Front Setback (from road right-of-way)		
Building Height		
Lot Width at Building Line		
Rear Yard Setback		

**Additional ten feet (10') required on all side yards which abut a public or private street*

COMMENTS: For pool-test only - no buildings permit is to be issued.

Zoning Permit Application
Page 2

ATTACHMENTS

In order to be considered complete, the following must accompany each application:

1. A fee (in cash or a check made payable to the Town of Troutman) in the amount of $25.00 shall be submitted to the Zoning Administrator.
2. A scaled dimensional drawing which shows (a) the exact shape, dimensions and location of the lot to be built upon, and (b) the exact shape, dimensions, use and location of existing structures on the lot. Upon this survey or drawing shall be sketched the following: (a) the exact shape, dimensions and area of the structure(s) to be placed upon the lot; (b) all setback lines on the lot once the proposed structure is completed; and (c) any other information that may be needed to insure that the proposed structure is in compliance with all applicable provisions of the Ordinance

CERTIFICATION

1. I hereby certify that all of the information provided for this application is, to the best of my knowledge, accurate and complete.

D. Stanley
Signature of Applicant

Date: 10/2/06

2. I, D. Stanley, Owner of property 4730-48-6343 (list PIN number) in Troutman, North Carolina, do hereby authorize MEADOW GLEN (Applicant's Name) to submit this zoning permit application to the Zoning Administrator on my behalf.

C/S Assoc by:
D. Stanley
Signature of Property Owner

Date: 10/2/06

3. To the best of my knowledge, this application is accepted and deemed complete.

Signature of Zoning Administrator

Date: Oct 3 2006

(THE FOLLOWING SHALL BE FILLED OUT BY THE ZONING ADMINISTRATOR)

Based on the information hereby furnished to me and my knowledge of the Troutman Zoning Ordinance, I hereby: ____ **APPROVE** ____ **DISAPPROVE** this Zoning Permit.

COMMENTS: _____

Zoning Administrator

Date: Oct 3 2006

THIS PERMIT EXPIRES SIX (6) MONTHS FROM THE ISSUE DATE.