



Zoning Certification Application

Planning & Neighborhood Services
PO Box 2430
Indian Trail, NC 28079
Telephone (704) 821-5401
Fax (704) 821-9045

Date Received _____

Submittal Requirements

- Completed Application
- Scaled dimensional drawing showing exact shape and dimensions of the lot, any structures to be built on the lot, and required setbacks
 - HVAC is deemed an accessory structure and shall comply with 5' setback
 - Deck or patio 12" or more in elevation shall be shown and comply with setback requirements
- Fees associated with review

General Information

Project Address _____

City _____ State _____ Zip _____

Subdivision Name _____ Lot # _____

Tax Parcel ID _____ Zoning Designation _____

Total Acres _____ Impervious Area _____

Project Description/
Construction Value _____

Contractors Name _____ Phone _____

Contact Information – Property Owner

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Signature _____ Date _____

Setbacks

Proposed Front _____ Right _____ Left _____ Rear _____

Required Front _____ Right _____ Left _____ Rear _____