



Planning & Neighborhood Services
PO Box 2430
Indian Trail, NC 28079
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APPLICATION FOR AN EXEMPTION REQUEST FROM THE UNIFIED DEVELOPMENT ORDINANCE

APPLICATION INFORMATION:

Name: _____

Address: _____

Phone Number: _____ Fax: _____ Email: _____

SUBJECT PROPERTY INFORMATION:

Site Address: _____ Zoning Designation: _____

Parcel ID #: _____

Existing Permit Number: _____

Specific ordinance section number(s) from which exemption is requested:

Please Attach a Letter of Intent Addressing the Following:

1. Description of the project requesting exemption.
2. If the applicant complies strictly with the provisions of the ordinance, will this result in an undue hardship?
3. Will the exemption of the provision result in a threat to the public health, safety, moral and general welfare of the residents of the Town of Indian Trail?
4. Explain how improvements required by the UDO would result in costs that outweigh the feasibility of the proposed project.

Applicant's Signature: _____ Date: _____