

Received Date: _____
Initials: _____

Application Fee: \$400 (Includes advertisement fee)

SPECIAL USE PERMIT APPLICATION

For Office Use Only:

Application Number: _____ Date processed: _____
Fee Type: Cash Check # _____ Credit Card Initials: _____

Applicant Acknowledgement:

I understand that the City of Goldsboro must have three (3) sets of Site plans submitted along with an electronic site plan emailed to the Planning Administrative Assistant listed on the website at www.goldsboronc.gov/planning or they will not be able to send out my application for formal review. I understand my 30 day review period begins after the City of Goldsboro acknowledges they have an electronic PDF copy of the required site plan. Information on the site plan shall meet or exceed the City of Goldsboro Unified Development Ordinance (UDO). Site plan needs to be in sufficient detail and scale to display precisely how the Special Use intends to operate. See attached sheet for common things expected on site plan.

Applicant Signature: _____

Application is hereby made to the City Council of the City of Goldsboro for a Special Use Permit (Complete the following information):

Property Address: _____

Proposed Use: _____

Number of Employees/Shift: _____ **Days/Hours of Operation:** _____

Outdoor Storage: Yes No **Storage Type:** _____

Total Acreage: _____ **Frontage:** _____ **Depth:** _____

Wayne Co. Pin #: _____ **Current Zoning:** _____

All businesses that operate within the city limits of Goldsboro must have a Business Registration certificate prior to opening a business. Please contact the City of Goldsboro Inspections Department at 919-580-4385 for all necessary permits, including ABC Permits, prior to operation or opening to the public.

Applicant (Print): _____

Applicant Address: _____ **City,State,Zip:** _____

Applicant Phone: _____ **Applicant Email:** _____

Owner (Print): _____

Owner Address: _____ **City,State,Zip:** _____

Owner Phone: _____ **Owner Email:** _____

(If owner differs from applicant a Owners Authorization Form is required upon submission)

SIGNATURE REQUIRED

Applicant - Printed

Applicant Signature

Date

CONDITIONAL REZONING & SPECIAL USE PERMIT APPLICATION

SITE PLAN REQUIREMENTS

**All requirements may not be applicable due to existing site conditions or the nature of the proposal*

- Staff recommends that a Professional Land Surveyor or Professional Engineer prepare the plan, this is not required but the site plan must be drawn to scale of at least 1": 100'
- Property Owner information (name, phone, email, address) to be noted on site plan
- Location of property lines (boundary of property)
- Property acreage/sq feet
- Property Tax Parcel number
- Location of existing R/W and easements
- Zoning district (noted on plan)
- Adjacent property uses
- Locations of proposed structures & setbacks from property line (including dimensions)
- Hours of operation
- Number of employees
- Parking detail
- Buffer detail
- Landscaping detail
- Trash collection area
- Loading/unloading area
- Flood hazard areas
- Number of dwelling units (multi-family details as applicable)
- Floor plan detail for existing structures

