



# CAPE CARTERET DEPARTMENT OF INSPECTIONS RESIDENTIAL ZONING PERMIT APPLICATION

Date: \_\_\_\_\_

Applicant:  Property Owner  
 Contractor

Project Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Owner : \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contractor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Current City Privilege License:  Yes  No  N/A \_\_\_\_\_

Contractor License Number and Classification: \_\_\_\_\_

Proposed Development \_\_\_\_\_  
\_\_\_\_\_

A zoning permit is not a building permit and does not allow the applicant to commence construction. By signing below, applicant is aware that in many instances, additional information or permits may be required prior to the issuance of a zoning permit. This may include, but is not limited to, elevation certificates, CAMA Permits, Health Dept Authorization, title searches, and Erosion Control Plans.

Furthermore, applicant is aware that any work inconsistent with the approved site plan may result in the revocation of the zoning permit and any related building permits. Applicant also affirms that all work will be performed in accordance with all applicable rules and regulations.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

---

**\*\*FOR OFFICE USE ONLY\*\***

Currently zoned \_\_\_\_\_  
Flood Zone \_\_\_\_\_ Zones other "X" requires an elevation certificate.  
Is the site plan acceptable?  Yes  No -Require Changes  
Is this lot nonconforming?  No  Yes -Title Searches on adjoining properties  
Is any portion of this lot in an AEC?  No  Yes -CAMA Permit Required  
Is this new construction?  No  Yes -Health Dept Authorization Required  
Is any construction proposed w/in 10' of a septic system?  No  Yes -Health Dept Approval  
Does the site appear to have an issue with runoff?  No  Yes -Erosion Control Plan Required  
Zoning Officer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_