

Development Permit Application Submittal Checklist

This checklist indicates the minimum items required for this permit application to be considered complete. Please initial each item in the following checklist. Write N/A for items that are not applicable.

Applicant Initials	Required component of complete application	Staff Initials
	(1) Applicant logged in (Station outside of the Inspection Department)	
	(2) Development Permit Application is filled out completely.	
	(3) Original signatures are included. Copies not accepted.	
	(4) Site/plot plan, drawn to scale, is included showing all existing and planned improvements, lot lines, setbacks, and access to right-of-way.	
	(5) Full survey by licensed surveyor is included showing all existing and planned improvements, lot lines, setbacks, and access to right-of-way.	
	(6) Addition specifications and plans are included, if applicable.	
	(7) All impervious surfaces are indicated in site/plot plan	
	(8) I have read and understand the entire Development Permit Application.	

I understand that no application will be held that is considered incomplete. If found to be incomplete it will be returned to me to make the corrections before it will be reviewed or considered. All information contained in this Development Permit Application is complete and accurate to the best of my knowledge and ability.

Applicant Signature: _____

Date: _____

Print Name: _____

CITY OF DUNN Development Permit Application

Please attach a plot plan that includes the following: lot lines and dimensions, location and size of all existing and proposed buildings, distance from each building to property lines, all driveway entrances, parking and loading areas, all existing landscaping (generally).

TO BE COMPLETED BY THE PROPERTY OWNER

Property Owner Contact Information

Applicant's Name:			
Applicant's Contact Telephone	Number: ()	
Applicant e-mail:			
Applicant Address:			
Property Address Information			
Property Address:			
County PIN:		000	
Dimensions of the Parcel:			
Width:	Depth:	Square Feet:	Acreage:

Description of Structure on the Parcel Current Use and Proposed Use						
	Currei	nt Use		Propo	osed Use	
Use	Sq. ft of structure	Business name if applicable	Use Sq. ft of Business name if applicable			
Residential			Residential			
Commercial			Commercial			
Office			Office			
Vacant			Vacant			
Other			Other			

Form Revised: March 2025

Existing Buildings on Parcel

Building	Width	Depth	Current Use		
Building 1					
Building 2					
Building 3					
Vacant					
# of existing parking spaces =					

Proposed Project					
	New Construction				
	Fence: Select location Front Side Rear Street side				
	Fence Height:FrontSideRearStreet side				
	Use of Existing Structure				
	Modification of Existing Structure				
	Addition to Existing Structure				
	Additional Building				
Dimens	Dimensions of New Construction: Width: Depth:				

Connection to Utilities					
Yes	Yes No Utility Yes No Uti l				Utility
		Electricity			
		Dunn water			Private well
		Dunn sewer			Private septic system
Storm water system					Harnett County water
		Natural gas			
Square feet of New Construction:					

Owner Certification

I hereby certify that I am the owner of the above identified property, that the information shown above and shown on the attached plot plan is correct and complete to the best of my knowledge. I understand that all decisions rendered will be based on and enforced according to this information. I understand that this permit, if granted, is issued on the basis of the information supplied by the owner and that this permit may be revoked in the event of any breach of representation or conditions.

Property Owner Signature:	Date:
Please print name:	

Form Revised: March 2025

To Be Completed by the Zoning Official

Current Zoning Classification	
Required Lot Size	
Required front yard setback	
Required rear yard setback	
Required side yard setback	

Food Plain Determination		
The property is not located in a flood plain.		
Property is located in flood plain, development is not		
Development is located in a designated flood hazard area.		
FIRM Panel Number: Date of FIRM Panel:		

Parking Spaces	
Number Required	
Number provided	

	Staff	Review		
Approved	Denied	Amount		Receipt #
Staff Signature:			Date:	
Printed Name:				
Special condition	5			

Form Revised: March 2025