



Fire Only _____
Bldg/Fire _____

CITY OF HICKORY COMMERCIAL ZONING APPLICATION

(A City of Hickory application becomes a permit upon approval by a City of Hickory Zoning Administrator)
Office (828) 323-7410 Fax (828) 323-7474

Parcel ID No. (If Known): _____ Date: _____

Physical Address: _____

The Proposed Use For This Building Or Land Is (Specific): _____

The Building Or Land Was Previously Used For (Specific): _____

List Physical Changes To Building Or Land: _____

Is The Proposed Land Disturbance Under One (1) Acre?

- Yes, Please complete the City of Hickory Application for Grading Permit
- No, Permit for Erosion & Sedimentation Control Plan from Catawba County Erosion Control must be forwarded to the City of Hickory Engineering Department for plan approval.
- N/A, No land will be disturbed as part of this work

Pre-Application Requirement: All projects that involve the construction, renovation, or addition to a structure of 15,000 ft² of floor area, create multiple principal structures, require the creation of new streets or utility line extensions, and/or generate a significant increase in traffic are required to have a pre-application conference with staff, prior to the submission of this application and plans.

Applicant: _____ Applicant's Telephone No.: _____

Applicant's Address: _____

Applicant's Fax: _____ Applicant's E-mail: _____

Property Owner: _____ Owner's Telephone No.: _____

Owner's Address: _____

Business Name If Different From Above: _____

Applicant's Signature: _____ Date: _____

FOR PLANNING & DEVELOPMENT USE ONLY

- | | | |
|---|---|--|
| <input type="checkbox"/> Change In Use | <input type="checkbox"/> Remodeling | <input type="checkbox"/> Accessory Structure |
| <input type="checkbox"/> Change in Occupancy | <input type="checkbox"/> Home Occupation | <input type="checkbox"/> Temp. Const. Office |
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Manufactured Housing | <input type="checkbox"/> Parking/Loading |
| <input type="checkbox"/> Interior Renovations | Other: _____ | |

FOR ZONING ADMINISTRATOR USE ONLY

REFERENCE NUMBER	ZONING DISTRICT	OVERLAY DISTRICT
<input type="checkbox"/> Front Setback	<input type="checkbox"/> Approved PD	<input type="checkbox"/> Size of Lot
<input type="checkbox"/> Rear Setback	<input type="checkbox"/> Approved Minor PD	<input type="checkbox"/> Use Permitted
<input type="checkbox"/> Side Setback	<input type="checkbox"/> Flood Plain	<input type="checkbox"/> Trees Required
<input type="checkbox"/> Side Street Setback	<input type="checkbox"/> Elevation Certificate Required	<input type="checkbox"/> Airport Ordinance
<input type="checkbox"/> Maximum Height	<input type="checkbox"/> Watershed III IV Protected	<input type="checkbox"/> Critical

Other (Describe): _____

Zoning Approved: _____ Date: _____

Zoning Administrator

Conditions of Approval: _____

No building, structure or zoning lot for which a zoning compliance permit has been issued shall be used or occupied until the Planning Director has, after final inspection, issued a certificate of zoning compliance.

Zoning Disapproved: _____ Date: _____

Zoning Administrator

Reasons for Disapproval: _____