

# SPECIAL USE PERMIT APPLICATION



**Planning & Neighborhood Services**  
**PO Box 2430**  
**Indian Trail, NC 28079**  
**Telephone (704) 821-5401**  
**Fax (704) 821-9045**

## **ONLY COMPLETE APPLICATIONS ACCEPTED**

Processing Fee \$300.00 for Major Home Occupation, \$400 for Non-Residential Use  
+ \$100 for Engineering Review for Commercial Plans  
Notification Fee \$100.00

Notices sent to all property owners within 400 feet of subject property

**\*\*A TECHNOLOGY FEE, 10% OF ALL APPLICABLE FEES, WILL BE APPLIED TO THE TOTAL FEE.\*\***

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Date Received \_\_\_\_\_



## SPECIAL USE PERMIT APPLICATION

### Submittal Requirements

- Completed Application
- Notarized signatures of applicant and property owner
- Letter of Intent
- Articles of Incorporation, Certificate of Incorporation, Articles of Organization, Corporate Charter, or similar (unless applicant is an individual)
- 8 copies of Concept Plan (including a digital copy)
- Statement of Justification (used to determine if Findings of Fact can be made at public hearing)
- Statement of Appraisal (8 hard copies and 1 digital)
- Fees associated with review
- **A TECHNOLOGY FEE, 10% OF ALL APPLICABLE FEES, WILL BE APPLIED TO THE TOTAL FEE.**

### General Information

Project Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Tax Parcel ID \_\_\_\_\_ Zoning Designation \_\_\_\_\_

Total Acres \_\_\_\_\_ Impervious Area \_\_\_\_\_

Project Description \_\_\_\_\_

### Contact Information – Applicant

Contact Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

### Contact Information – Property Owner

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_



## SPECIAL USE PERMIT APPLICATION

### Applicant's Certification

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name/Title \_\_\_\_\_

Signature of  
Notary Public \_\_\_\_\_ Date \_\_\_\_\_

Notary Seal

### Property Owner's Certification

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name/Title \_\_\_\_\_

Signature of  
Notary Public \_\_\_\_\_ Date \_\_\_\_\_

Notary Seal

#### TOWN OF INDIAN TRAIL OFFICE USE ONLY

CASE NUMBER: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

AMOUNT OF FEE: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

RECEIPT #: \_\_\_\_\_



## SPECIAL USE PERMIT APPLICATION

### PLEASE PROVIDE INFORMATION REGARDING THE FOLLOWING ITEMS TO BE CONSIDERED COMPLETE AS AN SUP APPLICATION

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- 1.) **Concept Plan** - Need to include specifics on the following items:
  - Building footprint (including setbacks, height, dimensions, etc.)
  - Parking Area (On and off-site, handicap spaces, truncated domemats, etc.)
  - Open Space Areas
  - Signage
  - Sidewalks, trail and bikeways
  - Lighting
  - Utilities
  - Stormwater/Drainage Calculations and Plan
  - Other Requirements related to this concept plan as may be needed or required by the Unified Development Ordinance, Land Development Standards, Comprehensive Plan, and/or other related plans
- 2.) **Letter of Intent** – Need to include specifics on the following items:
  - Hours of Operation (if not a residential use)
  - Size and scope of potential use
  - General outline of Concept Plan described above
  - Other Requirements related to this letter of intent as may be needed or required by the Unified Development Ordinance, Land Development Standards, Comprehensive Plan, and/or other related plans

### **STATEMENT OF APPRAISAL**

Please add a written consulting report from a North Carolina State Certified Real Estate Appraiser that conforms to Standard 5 of the Uniform Standards of Professional Appraisal Practice.

### **STATEMENT OF JUSTIFICATION (see attached form next page)**

The applicant must prove the following in a letter addressing each item in this list individually.

- 1.) That the use will not endanger the public health, safety, and welfare
- 2.) That the use will not injure the value of adjoining or abutting property (a statement from a Certified Real Estate Appraiser is required).
- 3.) That the use will be in harmony with the area in which it is located.
- 4.) That the use will be in conformity with the land development plan, thoroughfare plan, and other plans officially adopted by the Town Council.



## SPECIAL USE PERMIT APPLICATION

### **Statement of Justification:**

Please fill out this form or provide attached documentation as needed

**For each item, please specify as to how each required finding can be met and satisfied:**

1. That the use will not endanger the public health and safety

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2. That the use will not injure the value of adjoining or abutting property (a statement from a certified appraiser may be required to show this)

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3. That the use will be in harmony with the area in which it is located

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4. That the use will be in conformity with the Comprehensive Plan, Thoroughfare Plan, or other plan officially adopted by the Town Council

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