

P.O. Box 351
307 North Main Street
Dobson, NC 27017



TOWN OF DOBSON

APPLICATION FOR CONDITIONAL USE PERMIT

TO: ZONING BOARD OF ADJUSTMENT, TOWN OF DOBSON, NORTH CAROLINA

Name of Applicant: _____
Address of Applicant: _____
Applicant's Daytime Phone Number: _____ Date: _____

Conditional Use Applied for: _____
Specific Description of Conditional Use (if applicable): _____

Tax Parcel ID Number: _____ Current Zoning : _____
Address: _____
Brief Description of Property: _____
Date Plans Submitted: _____

*****As required by State law, all adjoining property owners will be notified by certified mail of this petition. Also, a legal advertisement will run once in a local newspaper. The petitioner is responsible for incurring all costs associated with compliance with State law for advertising this petition.**

SIGNED: (1) _____ (2) _____

OFFICIAL USE ONLY
ACTION BY THE ZBOA: _____

PUBLIC HEARING DATE: _____ SUPERIOR COURT DATE: _____
PERMIT ISSUED: Date _____ Initials _____
ASSIGNED E-911 ADDRESS OF APPROVED USE (if applicable): _____