



**SPECIAL EXCEPTION APPLICATION
FARMVILLE, NORTH CAROLINA**

3672 North Main Street; P.O. Box 86
Farmville, NC 27828
Phone: (252) 753-5921 Fax: (252) 753-2963

Staff Use Only
Parcel #: _____
Permit #: _____

OWNER/APPLICANT INFORMATION

DATE: _____

OWNER: _____

APPLICANT: _____

PHONE #: _____

PHONE #: _____

ADDRESS: _____

ADDRESS: _____

PROJECT INFORMATION

PROPERTY LOCATION: _____

ZONING DISTRICT: _____

PURPOSE OF SPECIAL EXCEPTION: _____

NEW STRUCTURE: YES/NO _____ SIZE: _____

OTHER INFORMATION: _____

The undersigned hereby agrees to conform to all town regulations, applicable state laws and the conditions of this permit. The undersigned further states that all information given herein is true and authorizes Town staff to enter onto the property to ensure all applicable rules and regulations are being met.

Owner Signature: _____ **Applicant Signature:** _____

=====

The applicant should respond to the following issues that the Farmville Board of Adjustments must find are met in order to issue a special exception permit. Answers should be supported by facts.

1. The use will not materially endanger the public health and safety;

2. The use will not substantially injure the value of adjoining or abutting property;

3. The use will be in harmony with the neighborhood or area in which it is to be located (compatible with surrounding area);

4. The use will be in general conformity with the land use plan, thoroughfare plan, or other plans officially adopted by the Board of Commissioners;

ZONING COMPLIANCE CERTIFICATE-Special Exception Fee Amount _____ Date Paid _____
DATE: _____ PARCEL#: _____
BOARD OF ADJUSTMENTS DECISION: APPROVED DENIED MEETING DATE: _____
ZONING OFFICER SIGNATURE: _____
CONDITIONS/COMMENTS: _____