TOWN OF WILSON'S MILLS



TEMPORARY USE/SPECIAL EVENTS ZONING PERMIT APPLICATION

Planning Department P.O. Box 448, Wilson's Mills, NC 27593 Phone: (919) 938-3885 Fax: (919) 938-1121

	The following must be submitted for the application to be	e considered complete:		
	 A Sketch Plan showing the boundaries of the propert special event or structure on the property, access and information sufficient to show that the special event Article 15 of the Wilson's Mills Development Ordinand specifications. Owner consent form if applicant is not the owner. 	y, the use of adjacent properties, the location of the parking provisions, restroom facilities, and other or structure complies with the standards set forth in		
	Permits shall only be valid for the dates on this permit.			
	The applicant must complete this application in full. This application will not be processed unless all information requested is provided and the owner has provided consent.			
	Submission of associated fees.			
	All permits are subject to associated building and trade permits from the Johnston County Inspections Department with required fees for permits, inspection fees, electric etc. To schedule an inspection, please call 919-989-5060.			
EVENT/USE	INFORMATION:			
Type of Event:				
Description:				
Event Date(s):	Eve	ent Time(s):		
Will outside ten	nts/canopies be used? Yes No Is t	he event open to the public? Yes No		
Describe how no	arking, safety, security and restroom standards will be me	at·		
Describe now pa	arking, safety, security and restroom standards will be me	ot		

GENERAL INFORMATION:				
Project Address / Location:				
Zoning District:				
Size of Property (in acres): Johnston Co. Tax PIN #:				
Setbacks: Front Side Rear				
APPLICANT INFORMATION:				
Applicant:				
Organization Name:				
City:	State:	_ Zip:		
Contact Person:				
Phone:	Email:			
OWNER INFORMATION:		_		
Owner:				
Address:				
City:				
Phone:	Email:			
SIGNATURE:				
I/we do herby certify that all of the information submitted above is accurate and true to the best of my knowledge. I/we do hereby agree to comply with the applicable Town of Wilson's Mills Ordinances in regard to this application. I understand that this permit may be revoked should any ordinance not be followed.				
*Applicant	Applicant Signature	Date		
*If applicant is not owner – please provide a signed & complete Owner Consent Form				
Date Received: Application #: Fee Paid/Date: Approved Denied Reason for Denial:	R TOWN USE ONLY			
Planning Department Signature	Date			