



Town of Stem
LAND USE PERMIT APPLICATION
Planning, Zoning & Watershed Department
919-529-2717

APPLICATION FOR:

- ☐ NEW STRUCTURE: ☐ COMMERCIAL ☐ RESIDENTIAL
- ☐ RENOVATION OR ADDITION: ☐ COMMERCIAL ☐ RESIDENTIAL
- ☐ FENCE
- ☐ ACCESSORY STRUCTURE
- ☐ POOL
- ☐ BUSINESS – ZONING COMPLIANCE
- ☐ OTHER _____

APPLICANT: _____ Email address: _____

Contact Phone #: _____

PROPERTY OWNER (If Different): _____

Mailing address _____ Phone #: _____

PROPERTY ADDRESS (If different from above): _____

If New Dwelling - Subdivision: _____ Lot #: _____

If No Address - Parcel Id #: _____

PROPOSED USE OF PROPERTY:

- ☐ New Fence: (Circle) [Front/Side Yard] [Rear Yard] Height: _____ Feet Fence Material(s): _____
- ☐ New Single Family Dwelling: Square Feet – Heated: _____ Unheated: _____
- ☐ New Modular Dwelling: Square Feet – Heated: _____ Unheated: _____
- ☐ Manufactured Home: SW: _____ DW: _____ Dimensions in Feet: _____ X _____
- ☐ Existing Structure: Renovation: _____ Addition: _____ Sq Ft – Heated: _____ Unheated: _____
- ☐ New Incoming Business – Business Name: _____
Business Use: (Retail, Office, Restaurant, Service, etc) _____
- ☐ New Commercial Building – Business Name: _____
Business Use: (Retail, Office, Restaurant, Service, etc) _____
- ☐ Other Uses (Specify): _____

Attach a site plan showing property lines, any existing structures, the location of proposed structure(s), and the distance between proposed structure(s) and all property lines.

Please email all permit submittals to zoning@stemnc.org

Applicant: I certify that all of the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Signature: _____ **Date:** _____