

Note: Application must be complete and Application fee must be paid at time of submittal

TOWN OF GARNER
www.GarnerNC.gov
CONDITIONAL USE SITE PLAN OR SUBDIVISION SUBMISSION FORM
OFFICE USE ONLY



**Town of
Garner, NC**

Case Number _____
 Date Received _____ Receipt# _____
 Related Projects _____
 Planning Commission Meeting Date _____
 Town Council Meeting Date _____

Planning Department

Type of Request:	<input type="checkbox"/> Conditional Use Site Plan Review	\$250
	<input type="checkbox"/> Conditional Use Subdivision Plan Review	\$250 + \$10/lot
Number of Copies Required:	Preliminary Review	<u>Twelve (12) (24x36) folded copies to 9x12 size</u>
	Planning Commission / Town Council Review	<u>Twelve (12) (24x36) folded copies to 9x12 size</u>
	Town Council Final Review	<u>Ten (10) (24x36) folded copies to 9x12 size</u>

Note: Due to physical storage space limitations, we respectfully request that you not submit plan reviews out-of-cycle. If you will not be meeting the next submittal deadline, please call the Planning Department at 919-773-4449 to determine the date of the next submittal opportunity.

Name of Development:	_____			
Property Location:	_____			
Parcel Id Number (PIN):	_____			
Total Acreage:	_____	Zoning	_____	Plat Book#

Proposed Use of Property (apartments, shopping center, townhouse, etc): _____

Number of Lots and or Units (existing & proposed):		_____	
Owner:		Contact Person:	
Mailing Address:		Telephone:	Fax:
_____		Email:	
_____		_____	
Owner Print	Date	Owner Signature	Date
Applicant:		Contact Person:	
Mailing Address:		Telephone:	Fax:
_____		Email:	
_____		_____	
Applicant Print	Date	Applicant Signature	Date
Site Designer:		Contact Person:	
Mailing Address:		Telephone:	Fax:
_____		Email:	
_____		_____	
Site Designer Print	Date	Site Designer Signature	Date

**TOWN OF GARNER
OWNER'S AUTHORIZATION**

If the owner(s) of this subject property are giving authorization for someone else to apply for an application to the Town of Garner for site/subdivision permits and/or rezoning requests, this authorization is to be completed and submitted at time of application.

I(WE), _____, do hereby certify that I(We)
(name(s) of owner(s) of subject property)

am (are) the owner(s) of the property legally described below and hereby certify that

I(We) have given authorization to _____ to

(Name of Company and Representative)

apply an application to the Town of Garner for site/subdivision permits and/or rezoning requests for My(Our) property.

Wake County Parcel Identification Number(s):

Corresponding Real
Identification Number(s):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Property Owner - Print

Property Owner - Signature Date

NOTARY STATEMENT

Sworn to and subscribed before me the _____ day of _____, 20____. Notary
Public in and for the State of North Carolina.

My Commission Expires: _____

Notary Public

Notary Public Printed Date

SEAL