

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

 <p style="font-size: 1.2em; margin: 0;">Town of Garner, NC</p>	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) folded copies (24x36) + CD-Signed/Sealed</u> Planning Commission /Council <u>Twelve (12) folded copies (24x36) + CD-Signed/Sealed</u> Town Council Final Review <u>Ten (10) folded copies (24x36) + CD-Signed/Sealed</u>

Note: The review fee is due upon submission.

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