

PLANNING DEPARTMENT

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ZONING MAP CHANGE APPLICATION

Application Number _____ **Date of Application** _____

Applicant/Owner Information

• **Applicant's Name:** _____

Address: _____

Email: _____

Phone: _____

• **Owner's Name:** _____

Address: _____

Email: _____

Phone: _____

Property Location

• **Description of location of property** _____

• **Parcel Number(s)** _____

• **Existing Zoning** _____ **Proposed Zoning** _____

- Existing Use _____
- Property Size _____ (Square Feet and/or Acres)

Other Required Information

1. The application shall be accompanied by a copy of a map drawn to an appropriate scale and showing the following:
 - a) All property lines with dimensions, distances of lot(s) from the nearest street intersection and north arrow.
 - b) Adjoining street rights-of-way and paving widths.
 - c) Zoning classifications of all contiguous lots.
 - d) The names and addresses of all contiguous property owners as shown on the most current records of the Lincoln County Tax Administrator's Office at the last addresses listed for such owners on the county tax abstracts. For the purpose of this section, properties are abutting even if separated by a street, railroad, or other transportation corridor.
2. Application fee: *less than 2 acres - \$200.00, 2-5 acres - \$400.00, more than 5 acres - \$800.00.* Please make payable to the City of Lincoln.

I hereby certify that all of the information provided for this application and all attachments are true and correct to the best of my knowledge.

Applicant

Date