

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
Planning
Department**

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

Type of Request:	<input type="checkbox"/> Conditional Use Site Plan Review	\$750 Effective 7-1-2017 \$750 + \$10/lot
	<input type="checkbox"/> Conditional Use Subdivision Plan Review	
Number of Copies Required:	Preliminary Review	<u>Twelve (12) (24x36) folded copies to 9x12 size + CD (pdf) of drawings</u>
	Planning Commission / Town Council Review	<u>Twelve (12) (24x36) folded copies to 9x12 size + CD (pdf) of drawings</u>
	Town Council Final Review	<u>Ten (10) (24x36) folded copies to 9x12 size + CD (pdf) of drawings</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):	Existing: _____	Proposed: _____
Owner:	Contact Person:	
Mailing Address:	Telephone: _____	Fax: _____
_____	Email: _____	
_____	_____	_____
Owner Print	Owner Signature	Date
Applicant:	Contact Person:	
Mailing Address:	Telephone: _____	Fax: _____
_____	Email: _____	
_____	_____	_____
Applicant Print	Applicant Signature	Date
Site Designer:	Contact Person:	
Mailing Address:	Telephone: _____	Fax: _____
_____	Email: _____	
_____	_____	_____
Site Designer Print	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

_____ t

o

(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