



## Town of Leland

102 Town Hall Drive  
Leland, North Carolina 28451

Telephone (910) 371-0148  
Fax (910) 371-1073

### Developmental Services Department

102 Town Hall Drive  
Leland, NC 28451  
Phone: (910) 371-3390  
Fax: (910) 371-2546  
[www.townofleland.com](http://www.townofleland.com)

#### Application Fee:

0-2000 SF	\$100.00
2001-4000 SF	150.00
4001-6000 SF	175.00
6001-8000 SF	200.00
8001-10000SF	250.00

Add \$25.00 per 2000 SF over 10,000 SF

## ***Commercial Zoning Compliance Permit Application***

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Please read this application thoroughly before completing. Please print or type all information on this form.

*(All associated fees are due upon submittal of application)*

### **Section A. Using the Application Form:**

- For new construction, eighteen (18) complete copies of the application and plans must be submitted for review and comment to the Developmental Services Department. An electronic PDF copy of the site plan is required either on CDR or via e-mail. Complete sections B, C and F of this application.

**NOTE:** *You are encouraged to arrange an informal pre-application conference with Developmental Services Department staff prior to the date upon which you intend to submit an application. By attending this conference, you will improve your chances of submitting a complete and acceptable application. You should bring a rough sketch of your proposal to this conference. Staff will point out any significant design problems, advise you regarding the required approval letters, and generally assist you in preparing an acceptable application.*

- If you are applying for an expansion, major modification or commercial up-fit, complete sections B, D and F and submit a copy of this application to the Developmental Services Department with the appropriate plans and fees.
  - It is the responsibility of the owner to research and evaluate the site and proposal to ensure that the development will conform to the interests of the health, safety and welfare of the public.
  - Please note that you must provide either a letter from the North Brunswick Sanitary District stating that the district will provide sewer to your site or a completed Town of Leland Sewer Service Application (attached) with the associated fees. Allocation requests over 2,000 gpd from the Town must be approved by the Leland Town Council. Please check with the Developmental Services Department to place your request on the Council's Agenda.
  - The Commercial Zoning process period begins when your completed application form has been accepted by the Developmental Services Department. Acceptance means the application has been stamped received and given a file number from staff. **A complete application includes all the appropriate fees and supporting documentation. Incomplete applications will be returned to the applicant.**
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**Section B. Getting Started:**

**Applicant Information**

Date: \_\_\_\_\_

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Have Current Business Privilege License? Yes \_\_\_\_\_ Lic. # \_\_\_\_\_ No \_\_\_\_\_

Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Property Information**

Parcel #: \_\_\_\_\_

Property Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_

(Street Address)

Lot Number: \_\_\_\_\_ Phase: \_\_\_\_\_ Section: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Proposed Action is: New \_\_\_\_\_ (Complete Section C) Up-Fit \_\_\_\_\_ (Complete Section D)

Expansion \_\_\_\_\_ Modification/Alteration \_\_\_\_\_ (Complete Section D)

Erosion Control Material Installed:  YES  NO

Flood Hazard Area:  YES  NO If yes, type \_\_\_\_\_

Driveway Drainage Pipe to Be Installed:  YES  NO

(If you checked "Yes" attach a detailed plan showing pipe size and stormwater calculations)

Water Source:  Well  N. Brunswick Sanitary District  Other \_\_\_\_\_

Sewage Treatment:  Septic Tank  Sewer System – NBSD or Town of Leland (please circle)

Proposed Use of Structure: \_\_\_\_\_

Describe Current Buildings on Property: \_\_\_\_\_

Height of Structure: \_\_\_\_\_ Total Square Feet of Structure: \_\_\_\_\_

Total Acreage of Site: \_\_\_\_\_

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**Section C. New Commercial Structure:**

## Site Plan Checklist

**Items listed in this checklist must be included on the site plan provided by the applicant to the Developmental Services Staff. Site plans should be drawn at a scale no less than one inch equals 100 feet on a sheet no larger than 24"x 36" folded to 8"x 11" size. All preliminary developmental plans must be prepared by a licensed professional surveyor, engineer, and/or architect/site designer. A PDF version of the site plan must be included with the application.**

**The following summary is provided for the applicant's benefit. However, fulfilling the requirements of this summary checklist does not relieve the applicant from the responsibility of meeting the regulations in the zoning ordinance, subdivision regulations, and any other development-related ordinances of the Town of Leland.**

### Basic Information:

<input type="checkbox"/>	Date, scale, north arrow and vicinity map
<input type="checkbox"/>	Detailed boundary descriptions of proposed site including location of corner or boundary markers as located on ground with lengths and bearings of property lines
<input type="checkbox"/>	Project name, owner's name and address, name of engineer, architect and/or surveyor
<input type="checkbox"/>	Location and size or width of all public R.O.W and/or easements within, bounding or intersecting the site including floodplain/floodway areas
<input type="checkbox"/>	Zoning of subject tract and abutting tracts
<input type="checkbox"/>	Existing and proposed topographic contours at vertical intervals no greater than (5) five feet of development area
<input type="checkbox"/>	The location, name, pavement width and right of way width of existing streets
<input type="checkbox"/>	Schedule of densities showing the number and type of dwellings per acre

### Site Layout Information:

<input type="checkbox"/>	Front elevation drawings
<input type="checkbox"/>	Acreage of proposed site
<input type="checkbox"/>	The location of all existing and proposed drainage facilities necessary to serve the site (including easements)
<input type="checkbox"/>	Location and square footage of existing and proposed structures
<input type="checkbox"/>	Use of existing and proposed structures
<input type="checkbox"/>	Front, rear and side yard setbacks of all structures (existing and proposed) (See TOL code 30-182 for requirements)
<input type="checkbox"/>	The location, name, pavement width, curb type, right-of-way width, pavement type, sidewalk location and curb cuts of all proposed street and parking facilities and site improvements (See TOL code 30-242. (j))
<input type="checkbox"/>	The location of any proposed open spaces
<input type="checkbox"/>	Buffer and screening devices proposed to separate uses within the development (See TOL code 30-241)
<input type="checkbox"/>	Location of outside waste facilities/trash receptacles and screening
<input type="checkbox"/>	Exterior lighting proposed and existing
<input type="checkbox"/>	Landscaping plan

### Parking Area (See TOL code 30-273):

<input type="checkbox"/>	Total parking area in square feet
<input type="checkbox"/>	Total number of parking spaces required and provided (show calculations)
<input type="checkbox"/>	Marked parking spaces showing width, depth and layout dimensions
<input type="checkbox"/>	Driveway line markings and wheel stop locations
<input type="checkbox"/>	Parking stalls marked and designated for handicapped persons, location of ramps per ADA Code

<input type="checkbox"/>	Location and size of loading areas (See TOL code 30-274)
<input type="checkbox"/>	Location and width of all curb cuts and driving lanes
<input type="checkbox"/>	Ingress and egress points
<input type="checkbox"/>	Fire lanes/emergency vehicle access lanes
<input type="checkbox"/>	Estimated trip generation
<input type="checkbox"/>	Full parking lot landscaping plan (See TOL code 30-241(m))

**Section D. Expansion-Modification/Alteration Commercial Structure**

<b>Site Plan Checklist</b>	
<p><b>Items listed in this checklist must be included on the site plan provided by the applicant to the Developmental Services Staff. Site plans should be drawn at a scale no less than one inch equals 50 feet on a sheet no larger than 24”x 36” folded to 8”x 11” size. All plans must be prepared by a licensed professional surveyor, engineer, and/or architect/site designer or by the applicant utilizing a survey plat or tax map of the parcel.</b></p> <p><b>The following summary is provided for the applicant’s benefit. However, fulfilling the requirements of this summary checklist does not relieve the applicant from the responsibility of meeting the regulations in the zoning ordinance, subdivision regulations, and any other development-related ordinances of the Town of Leland.</b></p>	
<b>Basic Information:</b>	
<input type="checkbox"/>	Date, scale, north arrow, vicinity map
<input type="checkbox"/>	Detailed boundary descriptions of proposed site including location of corner or boundary markers as located on ground
<input type="checkbox"/>	Project name, owner’s name and address, name of engineer, architect/site designer, and/or surveyor
<input type="checkbox"/>	Location and size or width of all public R.O.W and/or easements within, bounding or intersecting the site including floodplain/floodway areas
<input type="checkbox"/>	Existing use of the subject tract and abutting tracts
<input type="checkbox"/>	Location and square footage of existing and proposed structures
<input type="checkbox"/>	Front, rear and side yard setbacks of all structures (See TOL code 30-182)
<input type="checkbox"/>	Driveway location
<input type="checkbox"/>	Buffer and screening devices proposed to separate residential uses abutting the development (See TOL code 30-241)
<input type="checkbox"/>	Location of outside waste facilities/trash receptacles and screening
<input type="checkbox"/>	Exterior lighting proposed and existing
<input type="checkbox"/>	Total number of parking spaces (9’ x 18’) required and provided (show calculations) (See TOL code 30-273 (a))
<input type="checkbox"/>	Wheel stop locations for all perimeter parking spaces (See TOL code 30-237(i)(3))
<input type="checkbox"/>	Parking stalls marked and designated for handicapped persons, location of ramps per ADA Code
<input type="checkbox"/>	Location and width of driving lanes
<input type="checkbox"/>	Locations and size of loading areas (Cannot use required parking areas) (See TOL code 30-274)
<input type="checkbox"/>	Eight-foot-wide buffer area with forty (40) percent landscaped separating the building from the parking facility (See TOL code 30-237(i)(12))

**Section E. Record (As-Built) Development Plan:**

In accordance with Sec. 30-242 a record (as-built) development plan shall be submitted to the Developmental Services Staff prior to occupancy.

**Section F. Certification**

I certify that I am authorized to make this application, that the information provided is correct to the best of my knowledge, and that I am authorized to grant, and do grant, permission to the local zoning official and local building official to enter on the property described above for the purpose of inspections. I understand that if this application is approved, that failure to meet any conditions of the approval shall result in the revocation of any permit(s) based upon this certificate. I understand that upon completion of any construction, I am responsible for scheduling a final inspection with the Developmental Services Department. Failure to do so could result in fines and/or revocation of this zoning compliance permit should it be approved.

\_\_\_\_\_ *Applicant* \_\_\_\_\_ *Date*

After consideration and review of the zoning compliance permit application, I have determined that the applicant is in compliance with all Town ordinances, which relate to structures erected or situated within the Town.

\_\_\_\_\_ *Zoning Official* \_\_\_\_\_ *Date*

<b>OFFICE USE ONLY</b>	<input type="checkbox"/> <b>Impact Fee Paid</b>	<b>Submittal Date:</b> ___/___/___
Amount of Fee Paid: \$ _____	Date: ___/___/___	Initials: _____ Receipt # _____
Initial Inspection Date: ___/___/___	Final Inspection Date: ___/___/___	
<input type="checkbox"/> <b>Approved</b>	Zoning Permit # _____	<input type="checkbox"/> <b>Denied</b>