

City of Dunn Planning and
Inspections Department
102 N. Powell Ave. P.O. Box 1065
Dunn, NC 28335
Main: (910) 230-3505
Fax: (910) 230-9005
www.cityofdunn.org



Case # _____
Date received _____
Fee paid: _____
Board meeting date: _____
City Council meeting date _____

Special Use Application

Please print clearly

OWNERSHIP APPLICATION

Applicant: _____

Phone number: _____ E-mail address: _____

Applicant's legal interest in property: _____

Applicant's Address: _____
(Street) (City, State, Zip Code)

Property owner: _____

Owner's Address: _____
(Street) (City, State, Zip Code)

Date property acquired: _____ Deed reference: Book: _____ \Page: _____

Tax PIN Number: _____ - _____ - _____ .000

Size (square feet or acres): _____ Street frontage (feet): _____

Location / Address: _____

Attach a legal description in metes and bounds of the area requested for special use zoning.

Print Name

Signature

SPECIAL USE REQUEST

A. EXISTING ZONING: _____

Requested Use: _____

B. LAND USES

1. Existing Land Uses: _____

2. Uses Requested: _____

Number of parking spaces provided: _____

Driveway / Right-of-way access: _____

3. Existing or proposed land uses on all adjoining properties

North: _____

South: _____

East: _____

West: _____

C. STATEMENTS OF JUSTIFICATION (City of Dunn UDO, Chapter 3.06 (A) (5)b)

Attach a statement justifying the following:

- (1) The use will not materially endanger the public health or safety if located where proposed and developed according to the plan as submitted and approved.
- (2) The use meets all required standards of this Ordinance.
- (3) The use will not substantially injure the value of adjoining or abutting property.
- (4) Adequate utilities, access roads, drainage, sanitation, and other necessary facilities have been or are being provided.
- (5) The establishment of the proposed use shall not impede the orderly development and improvement of surrounding property.
- (6) The requested use will be in conformity with the City's adopted comprehensive plan(s).

INSTRUCTIONS FOR FILING A SPECIAL USE APPLICATION

- 1) A petitioner for a special use request must complete this application in full. This application will not be processed unless all information is provided.
- 2) Include the filling fee for each special use request, which is **\$700**.
- 3) Include a site plan drawn to scale of the entire property and the location of each facility and the uses of the property. The site plan should include parking layout, required landscaping, and applications of installation / construction.
- 4) The application must be signed by the owner or by an authorized agent of the property requesting the Special Use permit; the signature shall be notarized.
- 5) The City Council meets regularly the second Tuesday of each month at 6:30 pm in the Dunn Municipal Building located at located at 410 East Broad Street, and is the approving authority for all Special Use requests.
- 6) This project is required to go through the commercial site plan review process. This request is for use approval only. In order to ensure specifications meet the minimum standard(s) for the City of Dunn, a thorough review process must be performed. Reviewers may include, but are not limited to, Public Works, Planning Department, Inspections, the Fire Department, Environmental Health, etc.

For additional information or assistance, call the Planning Department at 910-230-3505.

ADJOINING PROPERTY OWNERS*(Within 150 feet of requested change.)*

| NAME | MAILING ADDRESS | PIN NUMBER |
|------|-----------------|--------------|
| 1. | | ____-__-____ |
| 2. | | ____-__-____ |
| 3. | | ____-__-____ |
| 4. | | ____-__-____ |
| 5. | | ____-__-____ |
| 6. | | ____-__-____ |
| 7. | | ____-__-____ |
| 8. | | ____-__-____ |
| 9. | | ____-__-____ |
| 10. | | ____-__-____ |
| 11. | | ____-__-____ |
| 12. | | ____-__-____ |
| 13. | | ____-__-____ |
| 14. | | ____-__-____ |

OWNER'S CERTIFICATION

I (We) do hereby certify that:

I am (We are) the owner(s) or authorized agent of the property described in this application for special use permit and have attached copies of deed, title reports, or other documents as proof of ownership.

I (We) have read the conditional use procedures and requirements and have truthfully completed this application for a special use permit.

I (We) understand that the filing fees are non-refundable; the process to review special use cases includes public hearing and review by the Planning Board and the City Council. I (We) understand any action to approve our request is at the discretion of the Planning Board and the City Council and additional requirements may be imposed as determined necessary.

| | |
|------------|-----------|
| _____ | _____ |
| Print name | Signature |

| | |
|------------|-----------|
| _____ | _____ |
| Print name | Signature |

| | |
|------------|-----------|
| _____ | _____ |
| Print name | Signature |

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public

My Commission Expires _____