



CITY OF CREEDMOOR

P.O. BOX 765
111 MASONIC STREET
CREEDMOOR, NC 27522
WWW.CITYOFCREEDMOOR.ORG
(919) 528-3332

RESIDENTIAL NEW ONE & TWO-FAMILY CONSTRUCTION PACKET Cover Sheet

Applicant Name _____

Street Address _____ City, State, Zip Code _____

Project Contact Name _____ Daytime Phone Number _____

Email Address _____

Project Address _____ Subdivision _____ Lot Number _____

The following information is required to be submitted in order to process an application for construction.

Note: All forms must be completed before application will be processed.

1. To Planning Department:

- Zoning Application
- Plat with structure shown with distances to property lines and existing utilities

2. To Building Inspections Department

- Building Permit Application
- Two sets of construction plans
- Contractor information to include state license numbers and local privilege license numbers

Internal Use Only

Planning & Zoning

Authorized Signature _____ Date _____

Building

Authorized Signature _____ Date _____

Public Works

Authorized Signature _____ Date _____



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Re: Requesting a Zoning Compliance Permit for New Construction

Dear Applicant(s):

The “Zoning Compliance Permit” application has been revised and now requires applicant(s) to **show the location of water and sewer service lines, meters, buffers, rights of way, and easements on the lot or parcel** on their site plan.

Providing this detailed information will assist City officials to better serve our customers and citizens by eliminating relocations of utility lines and meters after initial inspection.

In addition, a sealed “As-Built Survey” is required to be submitted for our records prior to the issuance of a Certificate of Occupancy (C.O.).

If you have any questions or concerns related to these requirements, please contact the Community Development Office at the numbers listed below. Thank you for your understanding and cooperation.

Building Codes Administrator
(919) 764-1017

Planning Director
(919) 764-1016

Stormwater Administrator/Senior Planner
(919) 764-1060

Date _____ Zoning Compliance Permit/Application # _____

Application for Construction of a building Relocation of a building Alteration of a building
 Change of Use Other

Applicant Information

Name _____ Phone _____

Mailing Address _____

Property Address (if different from mailing address) _____

Property Owner Information (if different from applicant)

Name _____ Phone _____

Mailing Address _____

Contractor Information

Name _____ Phone _____

Mailing Address _____

Primary State License # _____ Classification _____ Exp. Date _____

Description of Property

Tax Map ID/PIN # _____ Is property within 100-year Floodplain? Yes No

Lot Dimensions (As apply)

Length _____

Width _____

Area _____

Frontage from Right-of-Way _____

Is this a corner lot? _____

Structure Dimensions

Length _____

Width _____

Height _____

Principal Structure _____

Accessory Structure _____

Type of Use

- Single Family Residential
- Multi-Family Residential
- Industrial
- Commercial
- Accessory
- Institutional

Existing Structures on Property

- Vacant Lot (No Buildings/Manufactured Homes on Property)
- Accessory Bldg (Including Detached Carports, Garages, and Storage Buildings)
- Manufactured Home
- Site-Built Home
- Commercial/Industrial Building

Utility Services

- City Water
- Well
- City Sewer
- Septic Tank
- Gas
- Electricity

Is Structure in the Right-of-Way of Any of the Following (Check all that apply):

- City Utilities
- Railroad
- NCDOT or City Road
- Proposed Thoroughfare
- None

Description of Zoning

Zoning District _____ City Limits Extraterritorial Jurisdiction (ETJ)

Building Setbacks	REQUIRED	PROPOSED
Front yard	_____	_____
Rear yard	_____	_____
Side yard, left	_____	_____
Side yard, right	_____	_____
Height	_____	_____
Maximum lot coverage	_____	_____
Maximum density	_____	_____

Comments _____

Description of Proposed Work _____

Required Attachments

1. A site plan or sketch that shows the **LOCATION** of all proposed building(s), driveway(s), **WATER AND SEWER LINES, WATER AND SEWER SERVICE METERS**, setbacks from the property lines/right-of-ways, all primary and accessory buildings (existing or proposed), all building dimensions and any off-street parking or loading areas or other site elements.
2. For all new construction of primary buildings, a copy of the recorded plat/survey will need to be attached to this application. A copy can be obtained from the Register of Deed's office.
3. **Driveway Permit Application with required attachments.**

Notes

1. An approved Permit shall expire and be cancelled unless the work authorized by it shall have begun within six (6) months of its issue date, or if the work authorized is suspended or abandoned for a period of one year, unless vested rights are requested, then this permit is valid for a period of two (2) years.
2. The Planning Department must be notified to make on-site inspections once the setback lines have been identified on site (for new construction.)
3. The Planning Department will attempt to make zoning determinations within four (4) business days of submission of a fully completed application.

Owner/Applicant Statement

I certify that I am the property owner or truly represent the property owner(s). I certify that the foregoing statements are accurate and correct to the best of my knowledge. I understand that the City of Creedmoor is not bound by oral or written assertions or representations of its staff members. I agree to conform to all City of Creedmoor Ordinances and Laws of the State of North Carolina regulating such work and any plans or specifications submitted. Any violation of the Zoning Ordinances will be grounds for revoking this permit and any other permits issued in reliance upon the same.

Signature of Applicant _____ Date _____

Internal Use Only

Approved Disapproved Comments _____

Signature of Zoning Official _____ Date _____

The following information is required to be submitted with all requests for permits. Additional information may be required to ensure compliance with state and local laws.

Applicant Name _____ Date _____

Email Address _____ Daytime Phone _____

Project Address _____

Subdivision _____ Lot # _____ County _____

Trade Costs: Electrical \$ _____ Mechanical \$ _____ Plumbing \$ _____ **Total Project Cost \$** _____

Developer _____ Daytime Phone _____

Email Address _____

Property Owner _____ Daytime Phone _____

Email Address _____

Address _____ City _____ State _____ Zip _____

Project Contact _____ Daytime Phone _____

Email Address _____

Address _____ City _____ State _____ Zip _____

Description of Proposed Work _____

Type of Building New Existing Addition N/A

Type of Construction IA IB IIA IIB IIIA IIIB IV VA VB

Occupancy A-1 A-2 A-3 A-4 A-5 B E F-1 F-2 H-1 H-2
 H-3 H-4 H-5 I-1 I-2 I-3 I-4 M R-1 R-2 R-3
 R-4 S-1 S-2 U Mixed

Equipment New Existing Addition N/A

Property Use Single Family Two Family Apartment
 Condominium Townhouse Other (Library, Office, etc.)

Building Size Total Area Sq. Feet _____ Area per Floor Sq. Feet _____

Building Height _____ No. of Stories _____

State Agency Approvals NC Department of Insurance: Yes No N/A
Plan Approval _____ No. of Pages _____ Date _____
Specifications _____ No. of Pages _____ Date _____
NC Department of Labor: Yes No N/A
Elevator Approval Date _____ Boiler Approval Date _____

Check type of permit(s) required and complete the information for each.

General Construction Permit

Contractor Name _____ Daytime Phone _____
Email Address _____
Address _____ City _____ State _____ Zip _____
Primary State License # _____ Classification _____ Exp. Date _____

Electrical Permit

Contractor Name _____ Daytime Phone _____
Email Address _____
Address _____ City _____ State _____ Zip _____
Primary State License # _____ Classification _____ Exp. Date _____

Mechanical Permit

Contractor Name _____ Daytime Phone _____
Email Address _____
Address _____ City _____ State _____ Zip _____
Primary State License # _____ Classification _____ Exp. Date _____

Plumbing Permit

Contractor Name _____ Daytime Phone _____
Email Address _____
Address _____ City _____ State _____ Zip _____
Primary State License # _____ Classification _____ Exp. Date _____

Accessory Structures Permit

Accessory Building _____ Size _____ square feet
 Solid Fence Swimming Pool Other

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable state and local laws and ordinances and regulations. The City of Creedmoor Inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

Owner/Agent Signature _____ Date _____

Property Owner Name _____ Date _____

Property Street Address _____

Driveway Type Residential Commercial Industrial Church/School Other

Proposed Driveway

Proposed width _____ feet, centerline located _____ feet / miles north/south/east /west of the intersection of _____ and _____.

Proposed pipe material _____; Diameter _____ inches; Length _____ feet.

Agreement

I, the undersigned applicant, on behalf of the named property owner, request permission to construct driveway(s) on public right-of-way at the above location(s) and agree to the following:

1. To construct driveway(s) in absolute conformance with current City standards and approved plans as applicable;
2. To provide necessary sight distance easements if deemed necessary by the City;
3. To promptly repair areas disturbed by construction in City right-of-ways;
4. To provide and be responsible for work zone traffic control measures in and adjacent to City right-of-ways in conformance with guidelines established by the City of Creedmoor;
5. To maintain driveway(s) in a manner so as not to interfere with or endanger public travel;
6. To indemnify and save harmless the City of Creedmoor from all damages and claims for damage that may result from this construction;
7. To notify the City’s Department of Public Works not less that 48 hours prior to beginning work.

I agree that the City of Creedmoor will assume no responsibility for any damages that may be caused to such facilities, within the public right-of-way limits, in carrying out its construction. I understand that any permit issued based on this application becomes void if construction of the driveway(s) is not completed within six (6) months of the approval date shown on the permit.

Property Owner _____ Applicant _____

Address _____

Phone _____ Mobile _____ Fax _____

Property Owner Signature _____ Date _____

Applicant Signature _____ Date _____

In addition to this application,

1. Provide a sketch of proposed driveway(s) on reverse side or attach site plans. Sketch the proposed Driveway(s) to clearly show the following information:

- Locations of existing and proposed driveway(s) and street intersections adjacent to the property;
- Existing & proposed buildings, walls, fences, pipes/culverts, signs, poles, water meters, landscaping, etc.
- North arrow and applicable dimensions (driveway width, turn radii, distances, etc)
- Recommended scale is 1” = 20’. Please indicate if drawing is not to scale.

2. Submit three (3) copies of completed application and plans to the Planning Dept, PO Box 765, 111 Masonic Street, Creedmoor NC 27522. Call (919)528-3332 for additional information.

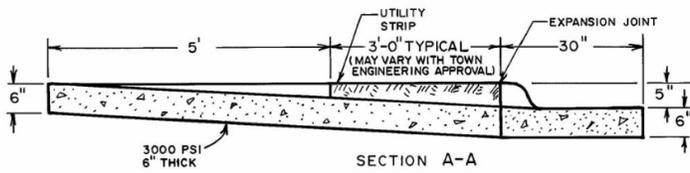
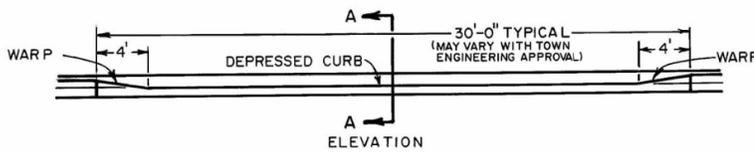
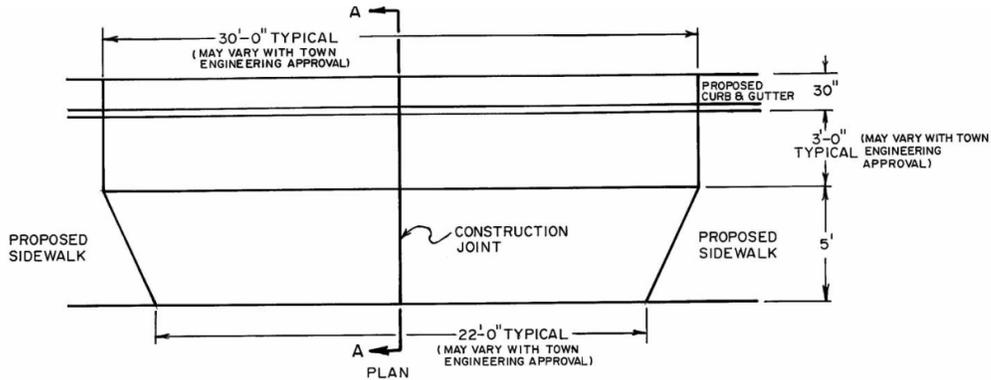
Internal Use Only

Approved Permit # _____

Denied Reason _____

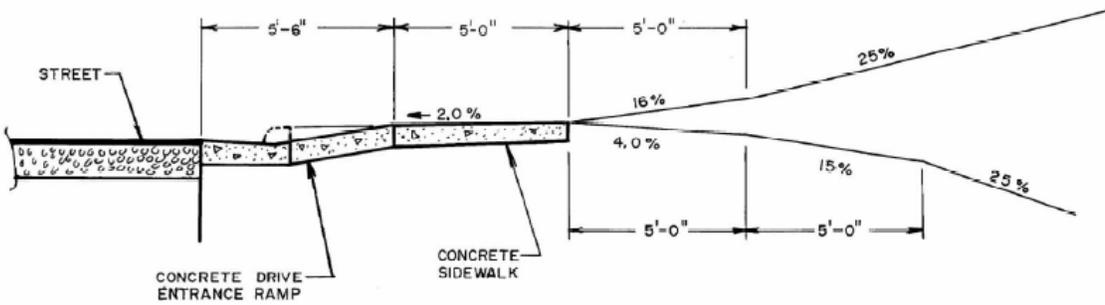
Authorized Signature _____ Date _____

DRIVEWAYS



NO SCALE

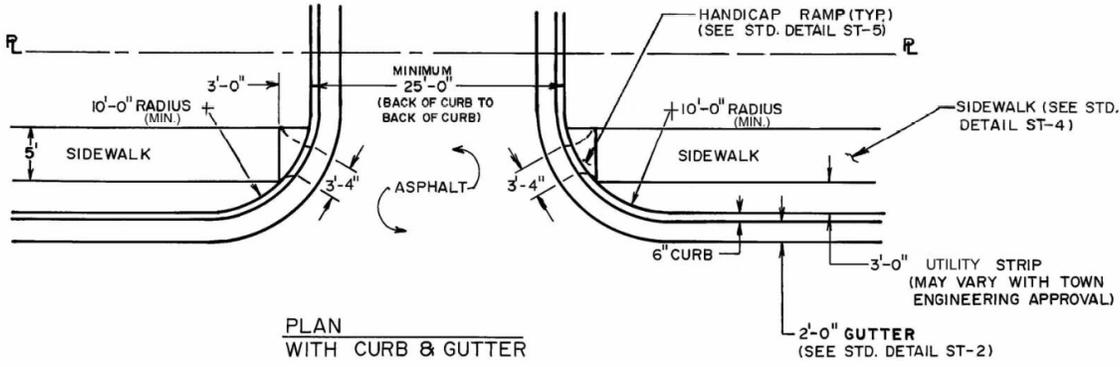
TITLE			REVISIONS		
FAN TYPE DRIVEWAY ENTRANCE			NO	DATE	BY



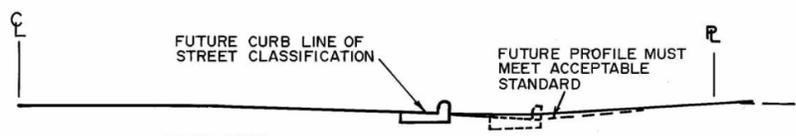
NOTE:
 1. GRADES ARE SHOWN FOR SINGLE FAMILY & TWO FAMILY LOTS ONLY. COMMERCIAL TYPE USES MUST FLATTEN GRADES ACCORDINGLY FOR HIGHER VOLUMES OF TRAFFIC, ACCORDING TO THE TOWN ENGINEER'S DIRECTION.

NO SCALE

TITLE			REVISIONS		
DRIVEWAY GRADES			NO	DATE	BY



PLAN WITH CURB & GUTTER



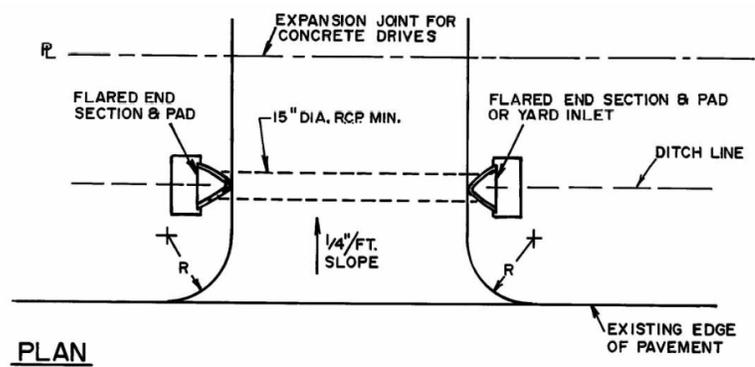
SECTION NO SCALE

- NOTES:
1. FOR COMMERCIAL & MULTI-FAMILY USES ONLY.
 2. DRIVES TO BE GRADED TO DRAIN TOWARD STREET FROM PROPERTY LINE & AWAY FROM STREET FROM PROPERTY LINE UNLESS STORM DRAINAGE STRUCTURES ARE PROVIDED TO INTERCEPT STORM FLOWS.
 3. DRIVE GRADE PROFILE SHALL BE DESIGNED TO TIE IN WITH ULTIMATE WIDENING OF STREET.

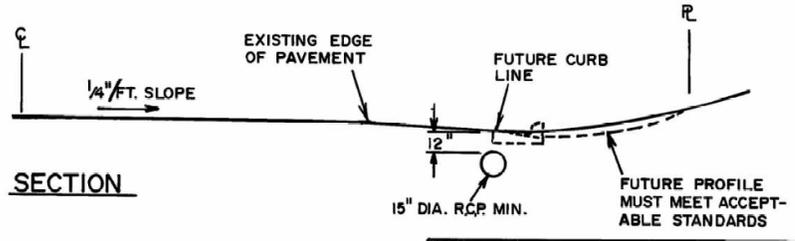
NO SCALE

TITLE			REVISIONS		
NO	DATE	BY	NO	DATE	BY
DRIVEWAY-STREET TYPE, CURB & GUTTER SECTION					

- NOTES:
1. FOR SINGLE FAMILY OR TWO FAMILY USE ONLY.
 2. ASPHALT DRIVES ARE PREFERRED: CONCRETE WILL BE ALLOWED. IF CONCRETE DRIVE IS USED, AN EXPANSION JOINT SHALL BE PROVIDED AT THE PROPERTY LINE OR BACK OF FUTURE SIDEWALK LINE WHICHEVER IS FURTHER FROM STREET.
 3. GRADE PROFILE SHALL BE DESIGNED TO PROPERLY TIE IN WITH THE ULTIMATE WIDENING OF THE STREET.
 4. DRIVEWAY PROFILE SHALL FALL @ 1/4"/FT. FROM EDGE OF PAVEMENT TO C OF ROADSIDE DITCH. PIPE SHALL BE PLACED TO HAVE 12" OF CLEARANCE BELOW FINISHED PAVEMENT AT THIS POINT.



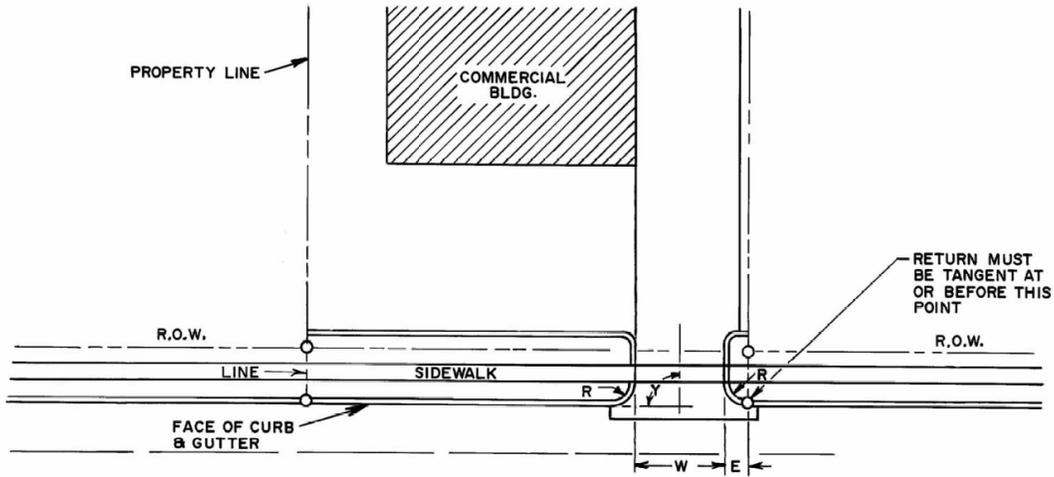
PLAN NO CURB & GUTTER ON STREET



SECTION

NO SCALE

TITLE			REVISIONS		
NO	DATE	BY	NO	DATE	BY
DRIVEWAY-NO CURB-DITCH SECTION STREET					



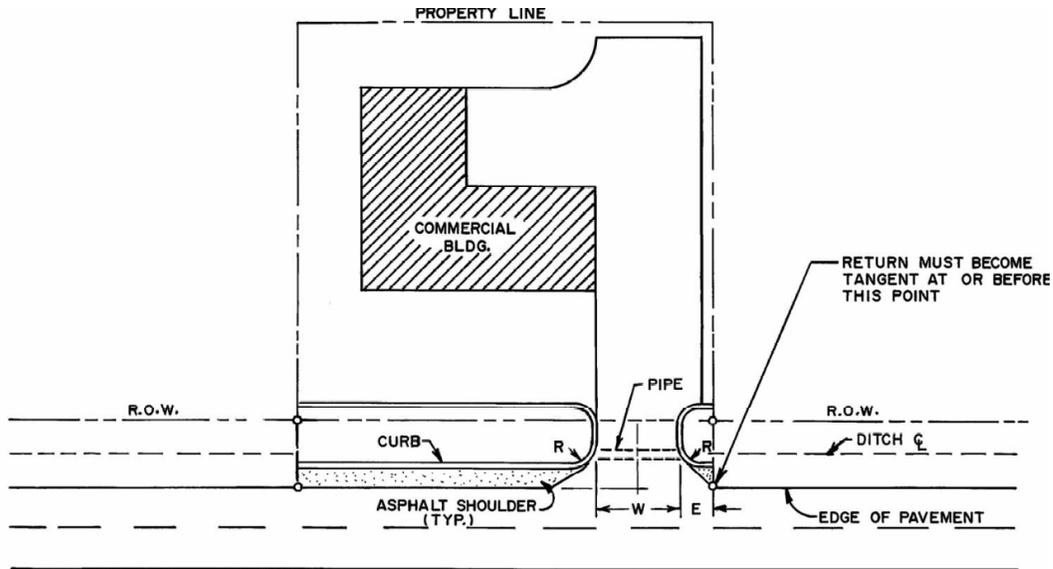
NOTES:

- 1. R- 3' (TOWN STD. RAMP)
 - 10' MIN., 20' MAX. (STREET TYPE)
 - W- (STREET TYPE)
 - ONE WAY: 12' MIN., 20' MAX.
 - TWO WAY: 20' MIN., 36' MAX.
 - E- 3' MIN.
 - Y- 90° PREFERRED
 - 75°-90° WITH TOWN ENGINEERING APPROVAL
2. ALL RADII ARE TO BACK OF CURB.

SINGLE DRIVEWAY COMMERCIAL ESTABLISHMENT
FIGURE 1

TITLE		REVISIONS		
COMMERCIAL SINGLE DRIVEWAY-CURB AND GUTTER		NO	DATE	BY

NO SCALE



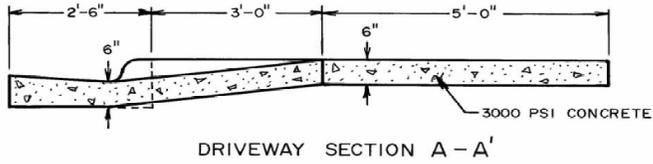
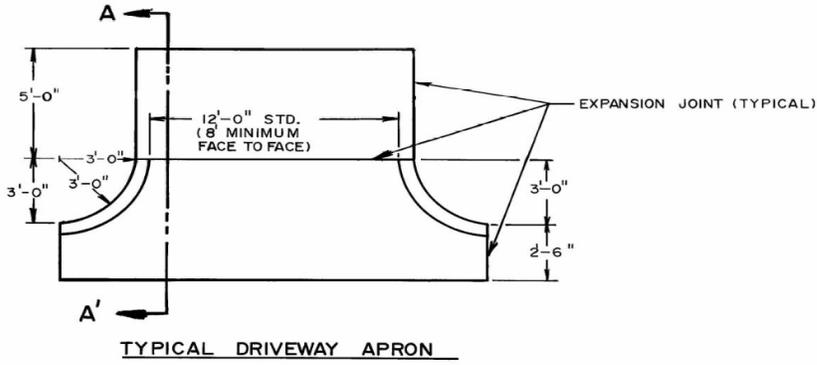
NOTES:

- 1. R- 10' MIN., 30' MAX.
 - E- 10' MIN.
 - W- ONE WAY, 12' MIN., 20' MAX.
 - TWO WAY, 20' MIN., 36' MAX.
2. ALL RADII ARE TO BACK OF CURB.

SINGLE DRIVEWAY COMMERCIAL ESTABLISHMENT
FIGURE 3

TITLE		REVISIONS		
COMMERCIAL SINGLE DRIVEWAY-DITCH SECTION		NO	DATE	BY

NO SCALE



NO SCALE

TITLE	REVISIONS		
	NO	DATE	BY
DRIVEWAY RAMP - CURB & GUTTER SECTION (ALT)			