



Town of Spring Hope

118 W. Railroad Street
Spring Hope, NC 27882
Phone: (252) 478-5186
Fax: (252) 478-7131

For office use only:

Application No. _____

Date Received: _____

Amount Received: _____

CERTIFICATE OF ZONING COMPLIANCE

Zoning Compliance Permit Fee = \$50
Site Plan May Be Required (tbd by Zoning Administrator)

Subject Property Street Address or PIN: _____

Reason for Use Requested: _____

Name/Company Name: _____ Contact Person: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone No. _____ Cell No. _____ Email: _____

Property Owner: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone No. _____ Cell No. _____ Email: _____

I further certify that I, the undersigned, am the owner of the subject property or I am making application with the full authority of the owner(s) and the statements herein are true and correct to the best of my knowledge. I also certify that I have or will comply with all applicable Town of Spring Hope, Nash County, or State of North Carolina Statutes, Codes, Ordinances or Regulations.

Applicant/Owner Signature

Date

Remarks: _____

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex, familial status, sexual orientation, and reprisal. (Not all prohibited bases apply to all programs.)"