



Town of River Bend

Zoning Permit Application Permit No. _____

1. Applicant's Name		Phone No.
2. Street Address	Mailing Address, if different:	
3. Property Owner's Name		Phone No.
4. Contact Name		Phone No.
5. Site Location (Street, Road, etc.)	Lot No.	District Zone of Site
6. Plat Plan <u>Required</u> (must include proposed changes and show distance between structures and distance to property lines) See Instructions on Reverse		
7. Storm Water Drainage Plan <u>Required</u> – Certified by a Licensed, Professional Engineer (See instructions on reverse)		
8. Building Site in Flood Plain <input type="checkbox"/> YES <input type="checkbox"/> NO		
<p>9. Proposed Structure:</p> <p><input type="checkbox"/> Residential Construction <input type="checkbox"/> Renovation <input type="checkbox"/> Excavation <input type="checkbox"/> Fill <input type="checkbox"/> Attached Garage <input type="checkbox"/> Grading <input type="checkbox"/> Utility Construction</p> <p><input type="checkbox"/> Road Construction <input type="checkbox"/> Driveway paving/tiling</p> <p><input type="checkbox"/> Nonresidential Construction (specify) _____</p> <p>_____</p> <p><input type="checkbox"/> Additional Accessory Structure (please briefly describe structure and purpose being sure to include square footage and height) _____</p> <p>_____</p> <p>If addition is a garage, will it be used for any purpose other than parking vehicles, building access or storage?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Does Not Apply (not a garage) (If yes, please briefly describe structure and purpose being sure to include square footage and height. See Reverse for instructions) _____</p> <p>_____</p> <p><input type="checkbox"/> Other (specify and briefly describe; i.e. fence, pool, irrigation system, etc.) (If irrigation system, will the system use well water or Town Water?) _____</p> <p>_____</p>		
10. Restrictive Covenants (We encourage you to review your copy of the restrictive covenants governing your property, if applicable)		
11. Property Served by the Town's Municipal Sewer System: <input type="checkbox"/> Yes <input type="checkbox"/> No (See reverse for instructions)		
12. Estimated Cost of Project:		13. Estimated Date of Completion of Project:
<u>Required Attachments:</u> (See reverse for instructions)		
Plat Plan		
Storm Water Drainage Plan		
Applicant's Signature		Date
Signature of Zoning Administrator Indicating Project Approval		Date
Permit Fee: \$		

See Instructions on Reverse

Permits Required

A permit is required for proposed building, construction, alterations, etc., located within the jurisdictional area of the Town of River Bend to assure conformity with the requirements of the Town's Zoning Ordinance. The Zoning Ordinance and all other Town ordinances are available for inspection or purchase at the River Bend Town Hall.

Form Instructions

Applicant must complete all items. If an item does not apply to this application, write N/A.

All appropriate boxes must be checked.

All drawings must be accurate and attached to the application.

Application must be signed and dated by applicant.

Additional instructions are provided below for assistance in completing line items 6, 7, 10 and 12.

#6. Each application for a zoning permit shall be accompanied with a plat signed and sealed by a licensed surveyor drawn to scale showing accurate dimensions of the lot, applicable easements, elevations of site including driveways and drainage features, relationship to adjoining lots and accurate dimensions of the building to be erected, constructed or altered, including its location on the lot.

#7. It shall be determined that the plan will be in compliance with the North Carolina Storm Water Site Planning Guidance Manual and will not adversely impact the flow of storm water in areas outside the new project. This plan shall be signed and sealed by a professional engineer, licensed to practice in North Carolina.

PLEASE NOTE: *If your site is located in the flood plain, you must contact the Zoning Administrator when foundation construction is complete so that it can be inspected.*

#10. Use of a garage for the purpose of locating a hot water heater, water softener, heating and air conditioning equipment and ductwork constitute usage "other than parking vehicles, building access or storage." The list provided here is not to be considered an all inclusive list.

#12. The Craven County Inspections Department issues Building Permits and performs required inspections for the Town of River Bend. Projects on lots that have septic tanks require a permit from the Craven County Health Department.

Failure to complete form properly or to provide the required information and drawings will delay the processing of your application.

A COPY OF THIS ZONING PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE ON PROPERTY DURING CONSTRUCTION.

HOLDER OF ZONING PERMIT MUST CONTACT ZONING ADMINISTRATOR UPON COMPLETION OF PROJECT. AN INSPECTION IS REQUIRED BY RIVER BEND OFFICIALS BEFORE THE COUNTY WILL ISSUE A CERTIFICATE OF OCCUPANCY.

Note: If the proposed construction requires a County Building Permit, a copy of this certificate must be delivered to the Craven County Inspection Department (2818 Neuse Blvd. 636-4987) prior to issuance of that permit.

Contact Us:	Type of Structure	Requirements
45 Shoreline Drive, River Bend, NC 28562 Phone (252) 638-3870 ext. 216 Fax: (252) 638-2580 zoning@riverbendnc.org www.riverbendnc.org 8:00 a.m. to 4:00 p.m. weekdays	Type 1 – Pre-FIRM Structure was built prior to 8/21/85	Advise vents will help flood insurance rates. Cannot allow any more non conformance
	Type 2 – Post FIRM Structure was built after 8/21/85 but before 7/18/01	Must meet code compliance at time of original construction
	Type 3 – Built Post FIRM but after 7/18/01 2 ft. freeboard	Must meet today's ordinance