

Town of Fairview

7400 Concord Highway Monroe NC 28110

ZONING VESTED RIGHT APPLICATION \$100

Per Section 117 of the Town of Fairview Land Use Ordinance

SUBMITTED WITH
APPLICATION NUMBER _____ DATE _____

APPLICANT'S NAME _____

PROPERTY OWNER'S NAME _____
(If Different From Applicant)

APPLICANT'S MAILING ADDRESS _____

PROPERTY OWNER'S MAILING ADDRESS _____

APPLICANT'S PHONE NUMBER _____ PROPERTY OWNER'S PHONE NUMBER _____

RELATIONSHIP OF PROPERTY OWNER TO APPLICANT _____

EXISTING USE OF PROPERTY _____

PROPERTY LOCATION _____

TAX MAP AND PARCEL NUMBER _____

SUMMARY OF ZONING VESTED RIGHT BEING REQUESTED (TIME FRAME,
REASON FOR VESTED RIGHT REQUEST, ETC.) _____

ZONING VESTED RIGHT APPLICATION
PAGE 2

REASON FOR APPEAL OF DECISION

CERTIFICATIONS

A. I HEREBY CERTIFY THAT ALL OF THE INFORMATION PROVIDED FOR THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE AND COMPLETE.

SIGNATURE OF APPLICANT

DATE

B. I, _____, OWNER OF PROPERTY _____ (List Tax Map, Book and Parcel #) IN FAIRVIEW, NORTH CAROLINA DO HEREBY AUTHORIZE _____ (Applicant's Name), TO SUBMIT THIS APPLICATION FOR A ZONING VESTED RIGHT ON MY BEHALF.

SIGNATURE OF PROPERTY OWNER

DATE

C. TO THE BEST OF MY KNOWLEDGE, THIS APPLICATION IS ACCEPTED AND DEEMED COMPLETE.

SIGNATURE OF LAND USE ADMINISTRATOR

DATE

(This Information Is To Be Filled Out By the Land Use Administrator)

1. SITE PLAN ATTACHED: Yes _____ No _____
2. PUBLIC HEARING DATE: _____
3. NOTICES TO APPLICANT AND ADJOINING PROPERTY OWNERS MAILED ON: _____
4. PUBLIC HEARING NOTICE FILED IN _____ ON _____
(Name of Newspaper)

(Attach Newspaper Affidavit)
[Date(s) Notice Was Published]

ZONING VESTED RIGHT APPLICATION
PAGE 3

6. ACTION TAKEN BY TOWN COUNCIL: _____

