



TOWN OF ROLESVILLE PETITION FOR A SPECIAL OR CONDITIONAL USE PERMIT

Application For: (check one) Special Use or Conditional Use Date of Application: _____

Name of Applicant: _____

Applicant's Mailing Address: _____

City/State/Zip: _____ Telephone: _____ Fax: _____

Name of Property Owner: _____

Owner's Mailing Address: _____

City/State/Zip: _____ Telephone: _____ Fax: _____

Location of Property: _____

Current Zoning District(s): _____ Wake Co. PIN: _____

This petition is to issue a permit for the following use: _____

The following information MUST be included before the application will be accepted and processed:

- Attachment A – a list of adjacent property owners with envelopes addressed and postage paid
- Attachment B – a write up with the following questions numbered, listed, and answered
 - 1. Does the proposed use comply with all of the specific conditions, dimensional requirements, and other standards which the ordinance requires? If no, please explain what doesn't comply and why.
 - 2. Are there any variances being requested and what are they? List each individually.
 - 3. Will utilities, school, fire, police, and other necessary public and private facilities and services be adequate to handle the proposed use? Please explain how they will be adequate.
 - 4. How will the proposed use not adversely affect the health and safety of the Rolesville residents and workers?
 - 5. How will the proposed use not be detrimental of the use or development of adjacent properties or other neighborhood uses?

I, as owner or agent, understand that I am responsible for all applicable fees due upon submittal of this petition. I understand that no review will take place until all fees have been paid. I agree that all information listed above and attached is correct and true to the best of my knowledge. I understand that while the permit is under review, the Board may impose conditions to the permit.

Signature

Date