



Planning Department
401 Laureate Way
Kannapolis, NC 28081
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RESIDENTIAL ZONING PERMIT APPLICATION

Applicant Contact Information

Name: _____

Phone: _____ Email: _____

Property Owner Information same as applicant

Name: _____

Phone: _____ Email: _____

Project Information

Project Address: _____

Parcel: _____ Zoning Designation: _____

Subdivision and Lot # : _____

Permit Request

Proposed Square Feet to be added

New Single Family Residence _____

Modular Home _____

Manufactured Home (single or double) _____

Duplex or Triplex _____

Addition (attached to principal structure) _____

Accessory Building (at least 36" from principal structure) _____

Solar Panels (attached to roof or to be located within side yard)

Other _____

A plot plan depicting proposed and existing buildings and the dimensions and measurements of all setbacks and easements must accompany this application. Builder is responsible for meeting all setbacks, easements and any applicable ordinances. The signing of the application certifies that you have been made aware of the following requirements and the information submitted on this form is true and correct.

Note: This is not a permit to occupy a structure. Owner and/or applicant are responsible for the location of utility lines and easements. The Zoning Clearance Permit does not guarantee the availability of water and/or sewer.

Applicant Signature _____

Date _____