

# Town of Holly Ridge

Post Office Box 145

Holly Ridge, North Carolina 28445

Telephone (910) 329-7081 Fax (910) 329-1593



## ZONING MAP AMENDMENT APPLICATION

Application Number: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Application Fee: \$ \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Purpose of Permit: \_\_\_\_\_

Property Location : \_\_\_\_\_

Parcel ID Number : \_\_\_\_\_

Lot Size (Acreage): \_\_\_\_\_ Square Foot: \_\_\_\_\_

Current Zoning District: \_\_\_\_\_ Requested Zoning District: \_\_\_\_\_

*A survey of the site prepared by a registered surveyor licensed to practice in North Carolina may be required.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

**A FEE WILL BE REQUIRED AT SUBMISSION OF THIS APPLICATION PER CURRENT ADOPTED FEE SCHEDULE.**