



Permit Number _____

CITY OF CLAREMONT

P.O. Box 446
3288 EAST MAIN STREET
CLAREMONT, N.C. 28610
828/459-7009 • FAX 828/459-0596

ZONING COMPLIANCE CERTIFICATE

Applicant: _____ Phone: _____

Address: _____

Owner: _____ Phone: _____

Location: _____ PIN: _____

Proposed Activity: _____ Property Size: _____

- A site plan showing property size, all existing structures, proposed structures and distances from property and right(s)-of-way lines is required and considered a part of this permit.
- This permit will expire **six (6) months** from the date it is issued if work has not begun on the approved activity.
- This permit will expire if work is suspended or abandoned for a period of **one year**.
- This permit may be revoked if the applicant gives any **false information**.

Applicant's Signature Date

OFFICE USE ONLY		
Zoning District: _____	Inside City Limits: _____	Census Tract: _____
Required Setbacks: Front: _____	Side: _____	Flood Zone: _____
Rear: _____	Street Side: _____	BFE: _____

COMMENTS: _____

Zoning Administrator's Signature Date

Copies of this permit for Catawba County Building Inspections and the applicant/owner's personal records are available upon request.