Town of Laurel Park • 441 White Pine Drive • Laurel Park, NC 28739 • P. 828-693-4840 • F. 828-696-4948



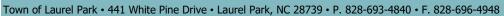


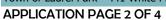


1. THINGS TO KNOW ABOUT THE DETERMINATION PROCEDURE

- 1. The determination procedure is described in Section 6.3.6 of the Laurel Park Unified Development Ordinance.
- 2. Determinations may be requested for specific UDO provisions or terms, boundaries on the Official Zoning Map, conditions of approval, unlisted uses, or vested rights status of prior development approvals.
- 3. The Town maintains an official record of prior determinations available for public inspection during business hours.
- 4. Only those determinations made in accordance with a submitted and complete determination application form are binding and are appealable to the BOA.

	form are bine	ding and are appealable	to the BOA.						
2. G	GENERAL A	APPLICANT INFORM	MATION						
1. F	L. Primary Point of Contact Name:								
2. 1	. Mailing Address:								
3. F	Phone:								
4. E	Email:								
3. DESCRIPTION OF REQUEST (Please complete the following)									
1. F	Please identify	y the type of determinat	ion requested:						
UDO	provision	Zoning map boundary	Condition of approval	Unlisted use	Vested rights status of prior application \square				
Othe	er (please spe	cify below):							
Click here to enter text.									
(request. Be specific —	Γ: please identify the pro identify the UDO section		that is the subject of this name, and the specific				
Attach additional sheets if necessary.									
t	that is the sub	pject of this interpretations with your application:			n of the Official Zoning Map of the map and the land's				
4.66-	-11-1:1:1 -1								

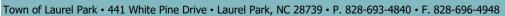




APPLICATION LAST UPDATED: 11.4.2021



	FOR DETERMINATIONS OF A CONDITION OF APPROVAL: If this determination request relates to conditions of approval, please identify the project number, and list the condition(s) below: Click here to enter text.
	EOD DETERMINATIONS OF AN LINUISTED USE: If this determination request relates to an unlisted use type
5.	FOR DETERMINATIONS OF AN UNLISTED USE: If this determination request relates to an unlisted use type, please describe the use and its operational characteristics below (be as specific as possible): Click here to enter text.
	ach additional sheets if necessary.
	FOR DETERMINATIONS OF VESTED RIGHTS STATUS: If this determination request relates to the vested rights status of a prior development approval, please identify the development's location, date of approval, and the type of approval, along with any other relevant issues below (be as specific as possible): Click here to enter text.
/.	Provide any relevant, supporting information that would assist the Town in making the interpretation. Describe
	how the interpretation carries out the intent and purpose of the UDO and any applicable zoning district:
	how the interpretation carries out the intent and purpose of the UDO and any applicable zoning district: Click here to enter text.
	• • • • • • • • • • • • • • • • • • • •



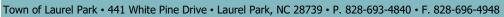


CLIDMITTAL CHECKLIST





4. SUDIVITI TAL CHECKLIST					
(please ensure your application includes 3 paper copies and 1 digital (pdf) copy of all of the following)					
Determination request form					
2. Application fee					
3. Copies of the specific text, zoning map boundary, conditions of approval, or prior development approval to be determined, as appropriate					
4. Any additional information determined to be necessary by the Town					
5. APPLICANT SIGNATURE					
I certify that the information provided in these application materials is complete and accurate to the best of my knowledge. I hereby authorize Town officials to enter the subject property (if this request involves a particular lot or site) for the purposes of determining compliance.					
If there are multiple land owners or applicants, a signature is required for each.					
Land Owner or Authorized Signature:					
Date:					
Land Owner or Authorized Signature:					
Date:					
Land Owner or Authorized Signature:					
Date:					
OFFICE USE ONLY					
Project #:					
Associated Project #:					
Received By:					
Filing Date:					
Accepted as Complete By:					
Complete Date:					
Decision:					
Decision By:					
Decision Date:					
Pre-application Conference Date (if conducted):					





APPLICATION PAGE 4 OF 4

Notes/Comments:									

APPLICATION LAST UPDATED: 11.4.2021