



## **Conditional Zoning District Application**

Lincoln County Planning and Inspections Department  
Zoning Administrator  
115 W. Main St., Lincolnton, NC 28092  
Phone: (704) 736-8440

### **PART I**

Applicant Name \_\_\_\_\_

Applicant Address \_\_\_\_\_

Applicant Phone Number \_\_\_\_\_

Property Owner Name \_\_\_\_\_

Property Owner Address \_\_\_\_\_

Property Owner Phone Number \_\_\_\_\_

### **PART II**

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

Property ID (10 digits) \_\_\_\_\_ Property size \_\_\_\_\_

Parcel # (5 digits) \_\_\_\_\_ Deed Book(s) \_\_\_\_\_ Page(s) \_\_\_\_\_

### **PART III**

Existing Zoning District \_\_\_\_\_ Proposed Zoning District \_\_\_\_\_

Briefly describe how the property is being used and any existing structures.

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List the proposed use or uses of the property.

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**APPLICATION FEE (less than 2 acres \$400, 2-5 acres \$800, 5+ acre \$1,200)**  
**And SITE PLAN MUST BE RECEIVED BEFORE PROCESSING.**

*I hereby certify that all knowledge of the information provided for this application and attachments is true and correct to the best of my knowledge.*

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Applicant's Signature

Date