



UNIFIED DEVELOPMENT ORDINANCE TEXT AMENDMENT APPLICATION

Applicant's Name: _____

Applicant's Mailing Address: _____

Applicant's Phone Number: _____

Applicant's Email: _____

FOR STAFF USE ONLY

PROJECT _____

DATE RECEIVED _____

FEE AMOUNT _____

FEE RECEIVED _____

REVIEWED BY _____

REVIEW DATE _____

PLANNING BOARD DATE _____

SECTION(S) OF CODE PROPOSED TO BE CHANGED (List Section numbers and text. Attach additional sheet if necessary):

PROPOSED TEXT WORDING (Attach additional sheet if necessary): _____

REASON FOR TEXT CHANGE (Attach additional sheet if necessary): _____

I do hereby certify that all information that I have provided for this application is correct and complete to the best of my knowledge.

By signing and submitting this document, I agree that all signatures where required may be Electronically Signed by either party pursuant to NCGS 66-315(b). ****If you are signing on behalf of a business (such as an LLC), you must include your title with the company****

Applicant-Printed

Date

Applicant-Signed

Date