

RECEIVED

SEP 01 2017

APPLICATION FOR SPECIAL USE PERMIT**THIS SECTION FOR OFFICE USE**

PENDER PLANNING DEPT.

Application No.	SUP 717-2017	Date	9-1-17
Application Fee	\$ 300.00	Receipt No.	558
Pre-Application Conference		Hearing Date	10-16-17

SECTION 1: APPLICANT INFORMATION



Applicant's Name:	FOREHAND AND BRADSHAW PROPERTIES LLC	Owner's Name:	BRIAN FOREHAND JEB BRADSHAW
Applicant's Address:	Po Box 747	Owner's Address:	Po Box 747
City, State, & Zip	HAMPSTEAD, NC 28443	City, State, & Zip	HAMPSTEAD, NC 28443
Phone Number:	910-232-2085	Phone Number:	910-232-2085
Email Address:	JEB MCM@gmail.com	Email Address:	JEBMCM@gmail.com

Legal relationship of applicant to land owner: OWNER

SECTION 2: PROJECT INFORMATION

Property Identification Number (PIN):	3271-64-5212-0000	Total property acreage:	4.24 acre
Zoning Classification:	GB	Acreage to be disturbed:	1.25 acre
Project Address :		NAICS Code:	
Description of Project Location:	WEST SIDE OF HWY 17 BETWEEN SCOTT'S HILL & HAMPSTEAD, ADJACENT TO SCOTT'S HILL FIRE DEPT.		
Describe activities to be undertaken on project site:	BOAT SALES / SERVICE / STORAGE		

SECTION 3: SIGNATURES

Applicant's Signature		Date:	9/1/17
Owner's Signature		Date:	9/1/17

NOTICE TO APPLICANT

1. Applicant must also submit the information described on the Special Use Checklist.
2. Applicant or agent authorized in writing must attend the public hearing.
3. Once the public hearing has been advertised, the case will be heard unless the applicant withdraws the application or unless the Board of Commissioners or other authorized person agrees to table or delay the hearing.
4. Applicant may wish to review the required findings for approval of a Special Use Permit found on page 1 of this application
5. **Permit will become void after 12 months if a final zoning permit is not obtained, unless specifically requested at the time of public hearing.**

Office Use Only

\$ 300 for the first 5 acres; \$10 per acre over 5 acres of the project area

Total Fee Calculation: \$ 300

Application#: 717-2017

Date of Hearing: 10-16-17

Attachments Included with Application: (Please include # of copies)

CD /other digital version	<input type="checkbox"/> Y <input type="checkbox"/> N	Plan Sets	# of large	# of 11X17	Other documents/Reports	<input type="checkbox"/> Y <input type="checkbox"/> N
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Payment Method:	Cash : <input type="checkbox"/> \$ _____	Credit Card: <input type="checkbox"/> Master Card <input type="checkbox"/> Visa	Check: <input checked="" type="checkbox"/> Check # <u>1054</u>
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Application received by:	<i>Brian Sat</i>	Date: 9-1-17
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Application completeness approved by:	<i>Brian Sat</i>	Date: 9-1-17
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