



HOKE COUNTY ZONING
Post Office Box 1556 – 423 E. Central Avenue
Raeford, North Carolina 28376
910-875-8407 office – 910-875-1072 fax

Application for a Conditional Use Permit

The following information **Must** be submitted with the attached application to the Hoke County Zoning Department.

- A map or plat of the property, drawn to scale, with an accurate metes and bounds.
- A list of adjoining property owners with 500 feet of the property for which the rezoning is being sought. (The Zoning Department Staff can assist you with a list.)
- Two sets of stamped, # 10 envelopes to be used for notifying adjoining property owners of the public hearings before the Planning Board and Board of Commissioners.
- Complete application.
- Filing fee of \$250.00

Planning Board Meeting (7:00 pm): _____

Board of Commissioners Meeting (7:00 pm): _____

The applicant or his/her representative is expected to attend all meeting to answer questions concerning the request. The absence of the applicant is sufficient grounds to warrant a deferral of action by the Planning Board and / or the Board of Commissioners.



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Application Conditional Use

Permit # CU- _____

Date: _____

Fee: \$250.00

PIN(s) # _____

ADDRESS: _____

TOWNSHIP: _____

SUBDIVISION AND LOT # _____

FRONTAGE: _____ DEPTH: _____ ACREAGE _____

CURRENT ZONING: _____

PROPOSED USE: _____

I, the undersigned, do hereby make application to and petition the Hoke County Planning Board and Board of Commissioners to change the zoning map of the Hoke County as requested herein. In support of this application, the following facts are presented above.

LANDOWNER INFORMATION

APPLICANT INFORMATION

Name: _____

Name: _____

Signature: _____

Signature: _____

City, State, Zip: _____

City, State, Zip: _____

Contact Number: _____

Contact Number: _____

PLANNING BOARD MEETING (7:00PM) _____

BOARD OF COMMISSIONERS (7:00PM) _____

STAMPED LEGAL ENVELOPES NEEDED: _____