



Town of Nags Head
Development Permit Applic

Submittal Date: _____

Planning and Development Department
 5401 S. Croatan Highway
 PO Box 99
 Nags Head, NC 27959
 252-441-7016 : www.nagsheadnc.gov

Project Site Information	
Street Address:	Subdivision:
PIN #:	<input type="checkbox"/> Rental Property <input type="checkbox"/> Primary Residence
Parcel #:	<input type="checkbox"/> Second Home <input type="checkbox"/> Other

Property Owner Information	Applicant Information
Name:	Name:
Mailing Address:	Mailing Address:
Phone:	Phone:
Email:	Email:

Type of Development (Check All That Apply)	
Classification of Work:	<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Remodel <input type="checkbox"/> Demolition <input type="checkbox"/> Repair <input type="checkbox"/> Relocation <input type="checkbox"/> Accessory Structure
Residential:	<input type="checkbox"/> Single-Family <input type="checkbox"/> Shed/Garage <input type="checkbox"/> Swimming Pool/Hot Tub <input type="checkbox"/> Elevator <input type="checkbox"/> Deck <input type="checkbox"/> Pergola/Cabana <input type="checkbox"/> Ground Level Enclosure <input type="checkbox"/> Other: _____
Commercial:	<input type="checkbox"/> Assembly <input type="checkbox"/> Business <input type="checkbox"/> Multi-Family <input type="checkbox"/> Motel/Hotel <input type="checkbox"/> Educational <input type="checkbox"/> Factory/Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Hazardous <input type="checkbox"/> Mercantile <input type="checkbox"/> Storage <input type="checkbox"/> Utility/Miscellaneous <input type="checkbox"/> Other: _____
Other:	<input type="checkbox"/> Excavation <input type="checkbox"/> Fill <input type="checkbox"/> Grading <input type="checkbox"/> Erosion Control Measures <input type="checkbox"/> Driveway <input type="checkbox"/> Septic <input type="checkbox"/> Irrigation <input type="checkbox"/> Pier/Bulkhead <input type="checkbox"/> Dune Walk-Over <input type="checkbox"/> Sign

Description of Work (Include # of Fixtures, Outlets, Units, Appliance, Etc. for Trade Work)
Total Project Cost: \$

Contractor Information	
General Contractor:	License #/Class:
License Expiration Date:	License Limitation:
Electrical Contractor:	License #:
Plumbing Contractor:	License #:
Mechanical Contractor:	License #:
Gas Contractor:	License #:
Non-licensed Contractor:	

Trade Work (Not Associated w/ Other Development)		
<input type="checkbox"/> Plumbing \$	<input type="checkbox"/> Electrical \$	<input type="checkbox"/> Mechanical \$
<input type="checkbox"/> Gas \$	<input type="checkbox"/> Elevator \$	<input type="checkbox"/> Other \$

Building Areas (sq. ft. / #)							
	Existing	Proposed	Total		Existing	Proposed	Total
Primary Structure Heated				Accessory Structure Heated			
Primary Structure Unheated				Accessory Structure Unheated			
# Bedrooms				# Bathrooms			

Floodplain Development Information (If Applicable)				
Flood Zone: <input type="checkbox"/> VE <input type="checkbox"/> AE <input type="checkbox"/> AO <input type="checkbox"/> X		BFE:	RFE:	
Vertical Datum:		Horizontal Datum:	Enclosed Area Below BFE? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, sq. ft.	
Proposed # Flood Vents:		Net Free Area Per Flood Vent:	sq. in.	Value of Structure: \$

Zoning Information (If Applicable)				
		Permeable (sq. ft. x 0.67)	Non-Permeable	Total
Lot Area:		Existing Lot Coverage:		
Allowable Lot Coverage*:		Proposed Lot Coverage:		
Existing Parking Spaces:		Proposed Parking Spaces:	Driveway Width at Property Line:	Shared Driveway? <input type="checkbox"/> Yes <input type="checkbox"/> No
Setbacks	Front:	Side:	Corner:	Rear:
Height:		Roof Pitch: :12	Fence Height: Front:	Rear:

Completed Residential Design Guidelines Point Tabulation Form (If Applicable)

Applicants for the construction of a Large Residential Dwelling (3,500 SF or > of enclosed habitable living area) should indicate whether they elect to follow the Town of Nags Head Residential Design Guidelines per Town Code Section 48-370 (d). This excludes properties located within The Village at Nags Head or in the SED-80 zoning district.

I, _____, owner of the property at the address listed on this form, elect / do not elect (circle one) to follow the Town of Nags Head Residential Design Guidelines for the construction of a large residential dwelling per Town Code Section 48-370 (d).

<input type="checkbox"/> Architectural Point Tabulation	Total Points Required:	Total Points Calculated:
---	------------------------	--------------------------

Landscape Plan – to be turned in prior to framing inspection

Erosion and Sedimentation Control (If Applicable)	
Area of Disturbance:	Sediment Control Plan <input type="checkbox"/> Yes <input type="checkbox"/> No Financial Responsibility Form <input type="checkbox"/> Yes <input type="checkbox"/> No

Lot Fill (If Applicable)		
<i>Surveys should include pre-disturbance elevation points at the corners of each proposed site element. Where fill is proposed, please complete the information below. See diagram for minimum required survey information for site development plans.</i>		
Site Elements	Current Elevation (lowest corner)	Proposed Elevation
House:		
Pool:		
Driveway:		
Parking:		
Other:		

Stormwater Management (If Applicable)		
<input type="checkbox"/> Non-Engineered Plan Must retain 15 cu/ft volume per 100 ft. BUA	<input type="checkbox"/> Engineered Plan 3% increase in lot coverage; Must retain 3.5" rainfall event	<input type="checkbox"/> N/A

CAMA Permit #:	DCHD Wastewater Permit #:
----------------	---------------------------

See **Permit Submittal Checklist** for required attachments and application information.
 Application will not be accepted until all required information is provided.
 Please contact the Planning and Development Department to confirm requirements for your particular project.

Property Owner Signature	Applicant Signature
The owner hereby authorizes the applicant and/or contractor listed on this form to act on his/her behalf to obtain a permit and complete project activities as described herein.	
Staff Use:	

Review Fees Paid \$	Acceptance: Y N	By:
----------------------------	------------------------	------------