



Zoning Use Permit Application –  
 Outdoor Storage for  
 Construction Equipment  
 (Plot Plan Required)

Street # \_\_\_\_\_ N,S,E,W \_\_\_\_\_ Street Name \_\_\_\_\_ AV, RD, ST, etc. \_\_\_\_\_ Suite \_\_\_\_\_

Project/Subdivision Name: \_\_\_\_\_ Phase: \_\_\_\_\_ Section: \_\_\_\_\_

**Article 9.27 Outdoor Storage of Construction Equipment**

Outdoor storage of construction equipment, where expressly permitted, may be established on a lot according to the following standards:

1. where permitted as an accessory use in conjunction with a building, the area of storage shall not be placed in any established yard abutting a street;
2. where permitted as a principal use on a lot, the area of storage shall be no closer than 40 feet from an abutting street right-of-way;
3. the area of outdoor storage shall be screened from view from the street(s) and from all abutting properties by an opaque screen (Section 7.6); wherever security fencing is desired, it shall be placed on the interior side of the opaque screen.

Current Property Use(s):	<hr/> <hr/> <hr/> <hr/>
Description of Proposed Use(s):	<hr/> <hr/> <hr/> <hr/>

**Applicant**

Printed Name \_\_\_\_\_ Phone \_\_\_\_\_

Corporation  Limited Liability Company  Trust  Partnership  Other: \_\_\_\_\_

By signature below, I hereby acknowledge, as/on behalf of (circle one) the applicant the use will comply with all regulations of Article 9.27 as related to the above use as indicated within the Town of Huntersville Zoning Ordinance.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

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

**Property Owner (if different than applicant)**

Printed Name \_\_\_\_\_ Phone \_\_\_\_\_

Corporation  Limited Liability Company  Trust  Partnership  Other: \_\_\_\_\_

By signature below, I hereby acknowledge, as/on behalf of (circle one) the applicant the use will comply with all regulations of Article 9.27 as related to the above use as indicated within the Town of Huntersville Zoning Ordinance.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Email \_\_\_\_\_

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

\* Property owner hereby grants permission to the Town of Huntersville personnel to enter the subject property for any purpose required in processing this application.

If signed by an agent on behalf of the Owner, this application MUST be accompanied by a notarized Limited Power of Attorney signed by the property owner (s), specifically authorizing the agent to act on the owner (s) behalf in signing this application. Failure of each owner, or their duly authorized agent, to sign, or failure to include the authority of the agent signed by the property owner, will result in an INVALID APPLICATION. **If additional space is needed for signatures, attach the Town of Huntersville Signature Addendum Form.**

**For Planning Department Use Only**

Parcel ID: \_\_\_\_\_ Zoning: \_\_\_\_\_  Huntersville  Mecklenburg

Minimum Setbacks: Front \_\_\_\_\_ Left Side \_\_\_\_\_ Right Side \_\_\_\_\_ Rear \_\_\_\_\_ Corner Lot

Lot#: \_\_\_\_\_ Map#: \_\_\_\_\_ Page#: \_\_\_\_\_ Req'd Parking#: \_\_\_\_\_ Screening \_\_\_\_\_

Mecklenburg County Health Department Approval \_\_\_\_\_ Plot Plan \_\_\_\_\_ Zoning Inspection \_\_\_\_\_

**Permit Conditions**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved By	Date Approved