



Date Received: _____
 Received By: _____
 BZR #: _____
 Invoice #: _____
 Payment via: _____

Business Conformance Zoning Review Application
Fee \$25 – Cash - exact change/money order/ Check – payable to City
of Covington * due at the time of submittal of the application

PROPOSAL TO BE COMPLETED BY APPLICANT

This form is for a preliminary review of a proposed use for conformance to zoning. It is important that the description of your proposed business is comprehensive in scope. **Please note: impact fees may apply.** Home based: Commercial:

***Home based:** Are you the lessee? ____ If yes, you must include a signed/notarized letter of approval from property owner.

***Commercial:** Has leased been signed? ____ If yes, submit a copy of lease agreement with application. Will you be doing any modifications to the property? ____ If so, please provide details:

Electrical, plumbing, demo, structural, and sign permits are required. Please contact our office prior to making any changes to the property to see if the work being done will require permitting.

Printed Name of Applicant/Business Owner: _____

Email Address: _____ Phone Number: _____

Name and Description of Existing/Previous Business (if known): _____

Name of Proposed Business: _____

Business Location Address: _____ Square Footage: _____

Description of Proposed Business: _____

Hours of Operation: _____ Delivery on a daily basis: Yes No Number of employees _____
 Number of Vehicles to parked on-site, including personal: _____ Number and type of vehicle(s) being used for proposed business:
 Number: _____ Make & Model of vehicle(s): _____

Are all business activities conducted on-site? If not, please explain:

Applicant/Owner Printed Name: _____ Applicant/Owner Signature: _____ Date: _____

*****For Office Use Only*****

Zoning District: _____ Parcel ID: _____ NAICS / 16.16.020 Permitted Use: _____

Approved: Approved w/Cond: Requires SUP: Denied: Business type requires permitting from NC Environmental Health:

Impact Fees required: yes : no Invoice amount: \$ _____ Invoice # _____ Paid: _____
 Verified By: _____ Date _____

Comment: _____

Compliance inspection: _____ R/S Compliance inspection: _____ Utility release: _____