



**TOWN OF CLAYTON**  
Planning Department  
111 E. Second St., P.O. Box 879  
Clayton, NC 27528  
Phone: 919-553-5002  
Fax: 919-553-1720

## CONDITIONAL USE PERMIT APPLICATION COVER SHEET

**Name of Project:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

***The following checklist to be completed by applicant:***

- Pre-Application Meeting on: \_\_\_\_\_
- Review fee
- Advertisement Fee
- Associated site plan (separate application required for major site plans, must be submitted concurrently)

***11 copies of the following:***

- Completed Application
- Owner's Consent Form
- Adjacent Property Owner's List
- Neighborhood Meeting Notice Letter (1 copy)
- Set of stamped, addressed, empty envelopes for adjacent property owner notification

***If required following Pre-Application Meeting:***

- Wastewater Allocation Request Form
- Signed/sealed Traffic Impact Analysis (2 copies)

**Reviewed by:** \_\_\_\_\_



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**CONDITIONAL USE PERMIT APPLICATION**

**Application Fee: \$400.00**  
**Advertisement Fee: \$200.00**

**New Conditional Use Permit**                       **Major Modification to an approved CUP**  
*Permit Modified: \_\_\_\_\_*

**SITE INFORMATION**

**Name of Project:** \_\_\_\_\_

**Acreage of Property:** \_\_\_\_\_ **Zoning District:** \_\_\_\_\_

**County Tag #:** \_\_\_\_\_ **NC Pin #:** \_\_\_\_\_

**Address/Location:** \_\_\_\_\_

**Existing Use:** \_\_\_\_\_ **Proposed Use:** \_\_\_\_\_

**Is project within a Planned Development?**  Yes  No **If yes, which:** \_\_\_\_\_

**Is project within an Overlay District?**  Yes  No **If yes, which:** \_\_\_\_\_

**Is a site plan being concurrently submitted?**  Yes       No

**APPLICANT INFORMATION**

**Applicant:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**OFFICE USE ONLY**

**Date Received:** \_\_\_\_\_ **Amount Paid:** \_\_\_\_\_ **File Number:** \_\_\_\_\_

**PROPERTY OWNER INFORMATION**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

**EXPLANATION OF PROJECT**

*Please provide detailed information concerning all requests. Attach additional sheets if necessary.*

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**REQUIRED FINDINGS OF FACT**

*Section 155.710(G) of the Unified Land Development Code requires applications for a Conditional Use to address the following findings. The burden of proof is on the applicant and failure to adequately address the findings may result in denial of the application. Please attach additional pages if necessary.*

1. That the application will not materially endanger the public health or safety if located where proposed and ultimately developed according to the plans as submitted.

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2. That the application meets all required specifications and conforms to the standards and practices of sound land use planning and the Town Code of Ordinances and other applicable regulations.

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3. That the application will not substantially injure the value of adjoining or abutting property, and will not be detrimental to the use or development of adjacent properties or other neighborhood uses.

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4. That the application will not adversely affect the adopted plans and policies of the Town, or violate the character of existing standards for development of the adjacent properties.

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**APPLICANT AFFIDAVIT**

*I/We, the undersigned, do hereby make application and petition to the Board of Adjustment of the Town of Clayton to approve the subject Conditional Use. I hereby certify that I have full legal right to request such action and that the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material and all attachments become official records of the Planning Department of the Town of Clayton, North Carolina, and will not be returned.*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

# NEIGHBORHOOD MEETING INFORMATION

## **Purpose:**

The purpose of the Neighborhood Meeting is to inform the surrounding property owners of the nature of the proposed land use and/or development features, answer questions, respond to concerns, and solicit comments.

## **Meeting Date:**

The neighborhood meeting must be held prior to the 1<sup>st</sup> scheduled public meeting date. It is recommended to hold the meeting at least 10 days prior to the 1<sup>st</sup> scheduled public meeting date, however, it is **not** a requirement.

## **Meeting Time & Location:**

The meeting must be held no earlier than 6:00 pm Monday through Friday, and must be held in a location generally accessible to residents within close proximity of the request. The meeting space must be able to comfortably accommodate everyone that receives an invitation.

## **Meeting Notice Mailing requirements:**

1. The applicant must contact all adjacent property owners via first class mailing (see sample letter).
2. The mailing must include all the persons, firms, or corporations owning property within 100 feet and immediately adjacent to the subject property. Where the subject property immediately adjoins a public or private right-of-way, landscape or riparian buffer, commonly-owned private area, public property, or homeowners' association property, then letters of notification shall be sent to adjoining property owners as if they directly abut the subject property.
3. The notice must be mailed at least ten (10) calendar days but not more than twenty-five (25) days prior to the date of the Neighborhood Meeting.

## **Information required to be provided at the Neighborhood Meeting:**

At a minimum, the following materials must be present and discussed at a Neighborhood Meeting:

1. A copy of the project application.
2. A schedule of all upcoming public meetings for the application.
3. A map at a scale that is appropriate to the project and shows neighboring properties and roads.
4. A map, drawing, or other depiction of the proposed land use change or development proposal.

## **Information provided to Planning Department:**

Alert the Planning Department once the date, location, and time of the Neighborhood Meeting are determined.

Deliver the following items to the Planning Department at least ten (10) calendar days prior to the 1<sup>st</sup> scheduled public meeting in electronic or hard copy format:

- Adjacent Property Owner's List (aka "mailing list") *Should be submitted with original application packet*
- Copy of the letter mailed *Should be submitted with original application packet*
- Attendance Roster (aka "sign-in sheet") *Submit no later than 10 days prior to 1<sup>st</sup> public meeting date*
- Neighborhood Meeting Summary Form with minutes (see below) *Submit no later than 10 days prior to the 1<sup>st</sup> public meeting date*



# SAMPLE NEIGHBORHOOD MEETING LETTER

(PLACE ON AGENT'S OR OWNER'S LETTERHEAD)

<Date>

Dear Clayton Area Property Owner:

The purpose of this letter is to notify you of an application filed with the Town of Clayton for a land use change or development proposal involving property adjacent to, or in close proximity to, property shown in your ownership by Johnston County tax records. Per Town of Clayton regulations, a Neighborhood Meeting will be held to provide information to area residents about the proposal. A representative of the applicant will be present to explain their application, answer questions, and solicit comments.

Meeting Date: \_\_\_\_\_ Meeting Time: \_\_\_\_\_

Meeting Location: \_\_\_\_\_

Type of Application: \_\_\_\_\_

Project/proposal property address: \_\_\_\_\_

Description of project/proposal: \_\_\_\_\_

Upcoming public meetings for this application (Planning Board and/or Town Council): \_\_\_\_\_

At a minimum, the following will be available for your inspection at the Neighborhood Meeting:

1. A copy of the project application.
2. A schedule of all upcoming public meetings for the application.
3. A map at a scale that is appropriate to the project and shows neighboring properties and roads.
4. A map, drawing, or other depiction of the proposed land use change or development proposal.

A map is enclosed with this letter showing the location of the property that is subject to this application for land use change and/or development proposal.

If you have any questions prior to or after this meeting, you may contact us at <Insert phone number of applicant>. You may also contact the Town of Clayton Planning Department at 919-553-5002.

Sincerely,

<Applicant>

Cc: Town of Clayton Planning Department

# NEIGHBORHOOD MEETING ATTENDANCE ROSTER

**Project:** \_\_\_\_\_

**Application:** \_\_\_\_\_

**Location/Date:** \_\_\_\_\_

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# Town of Clayton Conditional Use Permit Process Flow Chart



*This application will run concurrently with an associated site plan (see separate flow charts for site plan processes). If the site plan is minor, a separate application will not be required. If the site plan is considered major, a separate application will be required to run concurrently with the Conditional Use Permit.*

