



CITY OF ROANOKE RAPIDS

PLANNING & DEVELOPMENT DEPARTMENT

1040 ROANOKE AVENUE, PO BOX 38 ROANOKE RAPIDS, NC 27870

PHONE: 252-533-2844 FAX: 252-533-2870

EMAIL: PERMITS@ROANOKERAPIDSNC.COM

PAYMENT INFORMATION _____

BUSINESS USE PERMIT APPLICATION

MINIMUM ITEMS NEEDED TO PROCESS APPLICATION (3) scaled floor plans showing size and location of walls, partitions, doors, windows, counters, etc.; and completed Business Use Permit Application.

APPLICANT INFORMATION

Applicant: _____ Telephone: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Business Name: _____ Email Address: _____

BUILDING INFORMATION

Building Address: _____

Building Owner: _____ Telephone: _____

Owner's Address: _____ City: _____ State: _____ Zip: _____

Previous Business: _____ Date building was last occupied: _____

BUSINESS INFORMATION

Please write a brief description of your proposed activity (Expected business hours, Type of merchandise or services offered, etc.) Use separate sheet if necessary (PLEASE PRINT)

Will any merchandise or goods be displayed or stored outside of building? Yes No

Will all business operation be conducted entirely inside of the building? Yes No (If no, explain)

Will new signage be constructed? Yes No If yes, what type? Freestanding Wall (**Must obtain sign permit**)

Will any building construction or renovation be done? Yes No

If yes, describe the work to be done. Use separate sheet if necessary. (PLEASE PRINT)

Applicant Signature

Date

NOTE: All businesses are required to register and pay an annual Business Registration fee. Please contact the City of Roanoke Rapids' Tax Department at 252-533-2842.

PLANNING DEPARTMENT USE ONLY

LAND USE ADMINISTRATOR

Zoning: _____ Application fee paid: _____

Previous use classification: _____ Non-Conforming? ___ Yes ___ No

Proposed Use Classification: _____

Is the building located in a shopping center? ___ Yes ___ No

Will a change in use occur as per section 151-152 of the City of Roanoke Rapids Land Use Ordinance? ___ Yes ___ No

Will a site plan be required? ___ Yes ___ No

Will any additional information be required to process the application? ___ Yes ___ No

If yes, what is needed?

Has applicant been notified? ___ Yes ___ No

Waiting on additional information? ___ Yes ___ No

ADDITIONAL COMMENTS:

Approved _____ Denied _____ Date _____
Land Use Administrator

FIRE MARSHALL/BUILDING OFFICIAL

Previous Occupancy: _____ Proposed Occupancy: _____

Will a change in occupancy occurs as per the NC State Building Code? ___ Yes ___ No

Will a floor plan be required? ___ Yes ___ No

Will any additional information be required to process the application? ___ Yes ___ No

If yes, what is needed?

Additional Comments:

Building Inspector Date _____

Fire Marshall Date _____

Business Use Inspection: **PASS/FAIL** Comments: _____