

CERTIFICATE OF ZONING COMPLIANCE APPLICATION INFORMATION

Town of Apex, North Carolina



TOWN OF APEX DEPARTMENTAL CONTACT INFORMATION

Planning Department:	919-249-3426	Fire Department:	919-362-4001
Building Inspections Division:	919-249-3418	Public Works Department:	919-249-3427

PURPOSE: A Certificate of Zoning Compliance (CZC) is required to ensure that all proposed businesses comply with the Town of Apex zoning standards and applicable ordinances, protecting the public health, safety, and welfare of the citizen of Apex.

NOTE: The applicant will receive pages 3 and 4 upon completion of the staff review.

CZC REVIEW PROCESS: STEP 1 PLANNING DEPARTMENT APPROVAL

1. The application and all supporting documentation submitted to the Planning Department will be forwarded to the appropriate Town departments for review. Staff comments will be provided to the applicant at the end of the review process.
2. Contact the Public Works Department if it is stated in the review comments that a current backflow preventer report is not on file for the business address listed on the CZC. The backflow preventer report is due to Public Works prior to approval by Planning.

Note: The actual backflow preventer device will be evaluated at the time of site inspection to confirm/correct the type, placement, and recertification.

3. Once all comments have been responded to satisfactorily by the applicant, a Planning Technician and the applicant will sign the CZC. Copies will be given to the applicant and forwarded to Building Inspections.

CZC REVIEW PROCESS: STEP 2 BUILDING OCCUPANCY APPROVALS

After Planning Department approval of the business use, the applicant is required to do the following:

1. Schedule a fire inspection; Fire Department contact information will be provided with staff comments.
2. Contact the Building Inspection office for documentation requirements and Change of Tenant Permit to be issued to the business owner prior to scheduling the site inspection.

SUBMITTAL REQUIREMENTS: REVIEW 1-PLANNING DEPARTMENT

- Submittal Fee (if applicable)
- Completed Application
- Written business plan noting primary use as well as all accessory uses and activities.
- Backflow Prevention Service Application (attached)

ATTACH A WRITTEN BUSINESS PLAN TO THIS PAGE.

Application #: _____ Date Received: _____
Submittal fee: \$100.00 Form of Payment: _____

BUSINESS INFORMATION:

Business Name: _____

Address/Location: _____ Suite: _____

If the address is within a multi-tenant development, name the development (e.g. shopping center):

Days/hours of operation: _____

Square footage of space occupied: _____

- 1. Change of occupancy with or without a change of use (e.g. restaurant to restaurant).

Previous use at this location: _____

Proposed use at this location: _____

- 2. Are there any exterior changes/additions planned at this location? (e.g. landscaping, dumpster, HVAC, parking, painting, façade, etc.)

Yes No

If yes, list all items here: _____

- 3. No fee if this is an up-fit for the first tenant within a new multi-tenant development space.

Yes No

BUSINESS OWNER INFORMATION:

Name: _____

Mailing Address: _____

Email: _____ Phone: _____

PROPERTY OWNER INFORMATION (IF NOT THE APPLICANT):

Name: _____

Mailing Address: _____

Email: _____ Phone: _____

OWNER/AUTHORIZED AGENT STATEMENT

I hereby certify that the foregoing information is true and correct and that the building or land will not be used for any other purpose than indicated in this application.

Applicant Signature: _____ Date: _____

Applicant Print Name: _____

BUSINESS INFORMATION

Address: _____ Business Name: _____

PIN # _____ Zoning District: _____

If this is a conditional zoning district, do any conditions apply to use? Yes No

If yes, list conditions: _____

Use Classification, per the UDO Use Table: _____

Do any supplemental standards apply to use? Yes No

If yes, list supplemental standards: _____

Change of Use: Yes No

Current Class of Use: _____ Previous Class of Use: _____

Total Parking Spaces: _____ Parking required per the UDO: _____

Transportation Impact Fees due? Yes No

If yes, how much? \$ _____

OTHER DEPARTMENTAL REVIEW AND/OR INSPECTIONS (STEP 2):

If a department is indicated below, additional conditions and restrictions may apply other than those listed by the Planning Department.

Building Inspections: Contact the Permit Office Main# 919-249-3418

1. Applicant to contact Building Inspections for documentation requirements and Change of Tenant Permit to be issued to the business owner prior to scheduling the site inspection as noted below for Building Inspections.
2. There is no fee for the Change of Tenant permit but fees may be assessed for review of plans, if required, and trade permits that may be associated with the project. Water and Sewer capacity fees will be evaluated and assessed at the time of application for the Change of Tenant Permit, if needed.

Building Inspection Occupancy Classification:

- **First Tenant to Occupy Space:** A permit and CO is required for this space. The following documents need to be submitted to Building Inspections for review: Sealed plans to include Building Key Plan, Exit Plan, Building Summary (Appendix B), Scaled use layout of space, and Modifications noted.
- **Occupancy Classification Change:** The following documents need to be submitted to Building Inspections for plan review and issuance of an occupancy permit: Building Key Plan, Exit Plan, Building Summary (Appendix B), Scaled use layout of space, and Modifications noted.
- **Occupancy Classification Unchanged:** This is not a change of occupancy classification; therefore no permit or inspections will be required from Building Inspections. If any modifications are being done, then sealed plans will need to be submitted for review and issuance of a permit. This shall include any demolition of existing walls.

Fire Marshal Inspection:

Applicant calls to schedule a fire inspection after Planning Department approval. Contact:

David Dillon	Phone: 919-291-0648	Email: david.dillon@apexnc.org
Karl Huegerich	Phone: 919-291-9646	Email: karl.huegerich@apexnc.org

Public Works: Backflow preventer(s) - installation or test due.

Please complete the backflow survey form (included in the comment email) and send it to crossconnection@apexnc.org

Contact:

Steve Miller	Phone: 919-249-3357	Email: steve.miller@apexnc.org
Lindley Paynter	Phone: 919-249-3356	Email: lindley.paynter@apexnc.org

Address: _____ Business Name: _____

PLANNING DEPARTMENT DETERMINATION

This application has been reviewed for a proposed use request. Based on the information contained herein, along with the standards found in the Town of Apex Unified Development Ordinance and any additional information obtained from an actual site inspection or other sources, the following determination has been made:

Approved Approved/w Conditions Denied

Conditions/Comments/Restrictions:

Planning Departmental Approval: _____ Date: _____

Print Name: _____

APPLICANT AGREEMENT

I/we certify that I/we have read, understand and will adhere to the comments and restrictions contained in this application. I further understand that this document does not give approval for occupancy of the space or building for the business owner, employees, or the general public. Authorization for occupancy of the building or space will be granted by the Fire Department and Building Inspection office after a site inspection has been conducted and all site conditions have been accepted and approved. I understand I must contact the Fire Department and Building Inspection office to provide required documentation, apply for all applicable permits and pay assessed fees as required.

Applicant Signature: _____ Date: _____

Print Name: _____

Date staff received signature page: _____