



Department of Community Development

PO Box 8369
1200 Duck Road
Town of Duck, North Carolina 27949
(252) 255-1234

ZONING TEXT/ZONING MAP AMENDMENT APPLICATION

Applicant: _____ Date: _____

Mailing Address: _____

Telephone #: _____ Email: _____

Project Representative (if different from applicant): _____

Project Representative Telephone #: _____ Email: _____

Type of Request

[] Zoning Map Amendment (Fee \$750 plus \$500/acre or any fraction thereof beyond one acre)

Property Address _____ PIN # _____

Existing Zoning Designation _____ Proposed Zoning Designation _____

[] Zoning Text Amendment (Fee \$350)

Zoning Ordinance Section to be amended _____

Please include proposed text amendment language here (you may attach proposed language in ordinance form if additional space is needed)

Blank lines for proposed text amendment language.

Reason for map/text amendment request:

Blank lines for reason for map/text amendment request.

Applicant Signature _____

Property Owner Signature (if different from applicant) _____

A complete application shall be submitted to the Town of Duck Planning Office no later than the twentieth day of the month preceding the next regular Planning Board meeting (2nd Wednesday of each month) along with the appropriate fee as listed above. Checks shall be made payable to the Town of Duck.

FOR OFFICE USE ONLY
Proposal received _____ Received by _____
Fee Paid _____ Receipt No. _____