

City of Lumberton

Planning & Neighborhood Services Use Permit

Applicant: _____ Phone: _____

Address: _____

Owner: _____ Phone: _____

Address: _____

Email Address: _____

Address of building: _____

Previous use of building: _____

Proposed use of building: _____

Provide, in brief detail, all uses

Number of parking spaces provided for use: _____

Date: _____ Signature of Applicant: _____

Date: _____ Signature of Owner: _____

****Please note that all gaming machines require a Special Use Permit granted by
City Council****

Office Use

Parcel #: _____ Land Use: _____

District: _____ Number of parking spaces required: _____

Allowed use: Yes _____ No _____ Flood Zone: Yes _____ No _____
(Please insert flood zone information (i.e. zone, map #, date) in notes section)

Notes:

APPROVED BY:

Name and Title

Date

Name and Title

Date

Land Use Permit #: _____