


CHANGE OF USE PERMIT		Town of Princeton PO Box 67 503 Dr. Donnie H. Jones Jr. W. Princeton, NC 27569 (919) 936-8171	
Application Date:			
Issue Date:			
Fee(s):			

APPLICANT AND SITE INFORMATION

Property Parcel/ID #:		Property Address:	
Commercial or Residential?	Commercial Residential	New Business Name:	
New Business Owner:			
New Business Owner Address:			
New Business Owner Email Address:		Business Owner Phone:	
Property Owner(s):			
Prop. Owner Mailing Address:			
Prop. Owner Email Address:		Property Owner Phone:	
Applicant Name:			
Applicant Mailing Address:			
Applicant Email:		Applicant Phone:	

ZONING INFORMATION

Current Zoning	Is Rezoning Needed for Change of Use Request?

CHANGE OF USE INFORMATION

Current Type of Business at Location (mentioned above)
Proposed Type of Business at Location (mentioned above)

THE APPLICANT AGREES TO COMPLY WITH ALL BUILDING REGULATIONS, ZONING ORDINANCES, CODE OF ORDINANCES, AND OTHER LAWS APPLICABLE TO THE USE OF THIS STRUCTURE AND FACILITIES REFERENCED TO HEREIN. BUSINESS SHALL OPERATE IN ACCORDANCE TO THE INFORMATION AFOREMENTIONED IN THIS APPLICATION. I UNDERSTAND AND ACCEPT THE TERMS OF THIS PERMIT.

Owner Signature:		Date:	
Print Name:			
Approved By:		Date:	

Signed & Completed Forms May Be Emailed to Permits@MyPrincetonNC.com or Dropped Off at the Town Hall

- Files to be submitted with the Change of Use Application:
- Property Owner's Approval (If different from Applicant)
 - Business Hours, Type of Service(s) Being Offered, Type of Goods to be Sold (if any)
 - Drawings/Digital Renderings related to Business Logos, Sign Details, Etc.