MACON COUNTY WATERSHED PROTECTION ORDINANCE
PERMIT APPLICATION

APPLICANT INFORMATION

PROPERTY OWNER: ___________________________________________________ PHONE: __________________
PROPERTY OWNER ADDRESS _____________________________________________________________________
____________________________________________________________________

CONTRACTOR: ________________________________________________________ PHONE: ___________________
CONTRACTOR ADDRESS __________________________________________________________________________
_________________________________________________________________________________
CONTRACTOR LICENSE # _______________________________________________________________________

LAND RECORDS INFORMATION (query at www.maconnc.org or 349.2088)

PARCEL # _______________________________ TOWNSHIP_________________________ ACREAGE __________

SITE / DEVELOPMENT INFORMATION (check the box that applies to your project)

☐ New Residential Construction (indicate square footage of each item below)
Proposed Structure ______________________________ Roadbeds, Driveways___________________________

☐ New Commercial Building (indicate square footage of each item below)
Proposed Structure ______________________________ Roadbeds, Driveways___________________________

☐ Addition / Remodel (indicate square footage of each item below)
Existing Structure ______________________________ Roadbeds, Driveways, Covered Decks_________________

DO YOU HAVE WATER ON YOUR PROPERTY? ________ (CIRCLE ONE) STREAM LAKE POND

* If you do have water on your property, indicate setbacks on site plan. Applicant must submit a site plan of the proposed development. Specifications for site plan will be determined on a case by case basis. Attach site plan with permit application.*

I hereby claim that the information given above is true and correct to the best of my knowledge. I acknowledge the requirements placed upon me by this ordinance as well as those deemed necessary by the Watershed Administrator. I understand that Macon County personnel will make periodic inspections of this development. I acknowledge that any non-compliance with the provisions of this ordinance or its administrator could result in a stop-work order and may lead to civil and/or criminal penalties.

Applicant Signature: __________________________________________ Date: ______________________

Watershed District: ___________________________ Built Upon Restrictions _____________________________

Additional Regulation: ___________________________

***** ADMINISTRATIVE USE ONLY *****

Approved by: ___________________________ Date: ___________________________