

  
**Franklin County**  
*A Natural Setting for Opportunity*  
**Planning & Community Development**  
**ZONING FORM APPLICATION**  
**(ZONED AND NON-ZONED AREAS)**

**\*\*If the property owner has recently purchased the property, please include proof of ownership\*\***

**DATE:** \_\_\_\_\_

**APPLICANT'S NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**DAY TIME PHONE #:** \_\_\_\_\_ **CELL PHONE #:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**PROPERTY OWNER'S NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**DAY TIME PHONE #:** \_\_\_\_\_ **CELL PHONE #:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**TAX MAP & PARCEL #:** \_\_\_\_\_ **ZONING:** \_\_\_\_\_

**SUBDIVISION NAME AND LOT #:** \_\_\_\_\_

**DIRECTIONS TO PROPERTY FROM ROCKY MOUNT:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DESCRIPTION OF DWELLING:**

**STICK BUILT HOME**       **MODULAR**  
 **SINGLEWIDE**     **DOUBLEWIDE**     **TRIPLEWIDE**       **OTHER:** \_\_\_\_\_

**(PLEASE CONTINUE TO THE NEXT PAGE OF FORM)**

WILL THIS BE THE ONLY HOME ON THE PROPERTY?  YES  NO

IF NO, HOW MANY HOMES ARE CURRENTLY ON THE PROPERTY? \_\_\_\_\_

WHO OCCUPIES EXISTING HOME ON THE PROPERTY? \_\_\_\_\_

WHO WILL OCCUPY 2<sup>ND</sup> HOME, AND WHAT IS THEIR RELATIONSHIP TO THE PROPERTY OWNER?

\_\_\_\_\_  
\_\_\_\_\_

IF MOBILE HOME:

YEAR OF MOBILE HOME: \_\_\_\_\_

IS THE MOBILE HOME CURRENTLY LOCATED IN FRANKLIN COUNTY?  YES  NO

If NO, where: \_\_\_\_\_

IF PART OF A BUSINESS:

PLEASE DESCRIBE THE BUSINESS: \_\_\_\_\_

HOW MANY EMPLOYEES, EXCLUDING THOSE LIVING IN THE RESIDENCE: \_\_\_\_\_

WILL CUSTOMERS COME TO THE RESIDENCE?  YES  NO

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_