



Town of Aberdeen  
**Planning & Inspections Department**

Office: (910) 944-7024 | Email: Aberdeen.Planning@gmail.com



**DETERMINATION - APPLICATION**

*ALL sections of this application **MUST** be filled out, or will be deemed incomplete and rejected by the Planning & Inspections Department.*

**APPLICATION DATE :** \_\_\_/\_\_\_/\_\_\_ **LOCATION / ADDRESS :** \_\_\_\_\_

**PROPERTY OWNER :** \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email Address : \_\_\_\_\_

**APPLICANT :** \_\_\_\_\_

Phone Number : \_\_\_\_\_ Email Address : \_\_\_\_\_

Status of Applicant :  Property Owner  Tenant  Legal Representative  Other : \_\_\_\_\_

License Number : \_\_\_\_\_ Classification : \_\_\_\_\_

**TYPE OF DETERMINATION REQUEST** (Using Aberdeen UDO Section 2.6.4.C.) :

- Zoning District Map Boundaries
- Unlisted Uses
- Text Provisions

Description of request : \_\_\_\_\_

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**ACKNOWLEDGEMENT :** I hereby agree to conform to all applicable laws and regulations of the Town of Aberdeen, Moore County and State of North Carolina (as may be applicable to my request), and certify that the above information and accompanying documents are complete, true and accurate to the best of my knowledge. In addition, I acknowledge that by filing this application, representatives from the Town of Aberdeen may enter the subject property for the purpose of investigation and analysis of this request.

APPLICANT SIGNATURE : \_\_\_\_\_ DATE : \_\_\_/\_\_\_/\_\_\_