

SINGLE RV (RA ZONE) APPLICATION SUBMITTAL POLICY

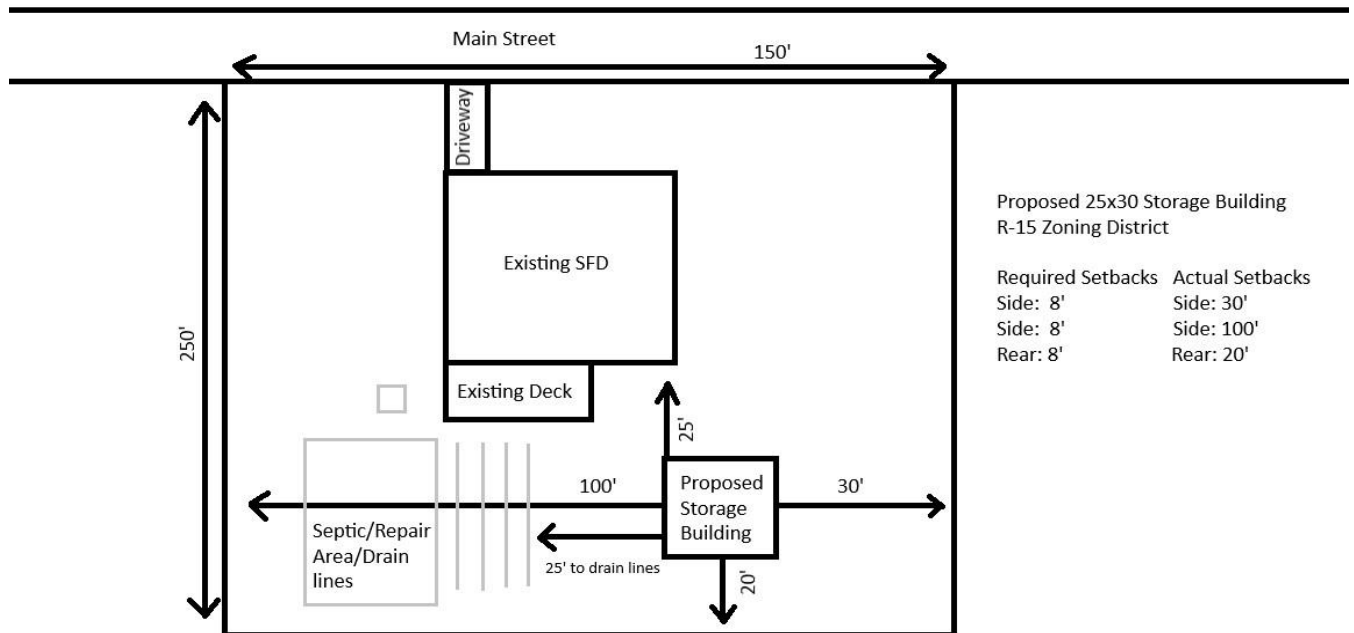
An application is considered complete only if it includes **ALL** of the following:

- Completed and signed Single RV (RA Zone) Application form
- Completed Residential Electrical Application
- Copy of Septic Permit (or proof of sewer when not on septic)*
- Site Plan (see checklist below)
- Copy of CAMA Permit, if required

*If the RV is to be connected to a water under pressure (i.e. public water supply, community well or private well), it must also be connected to an approved wastewater system (septic or sewer system).

SITE PLAN CHECKLIST. The site plan must clearly illustrate distances from property lines for existing structures and proposed structures and include the following:

- Property Lines with lot dimensions
- Easement Lines (indicate type of easement)
- Septic System (including tank, drainfields and Septic Repair Area)
- Existing Structures
- Proposed Structures
- Flood and/or CAMA lines, when applicable



Site Plan Example

CONTACT INFORMATION

Completed applications may be emailed to permitting@onslowcountync.gov.

Please contact our office at 910-455-3661 and choose option 3 to speak to a member of the Land Use staff.

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SINGLE RV APPLICATION (RA ZONE)



PLANNING & DEVELOPMENT DEPARTMENT

PROJECT AND PROPERTY INFORMATION

Type of Proposed Recreational Vehicle: _____

Dimensions of Proposed Recreational Vehicle: _____

Water Source: _____

Septic Permit Number/Sewer Source: _____

Property Address: _____

Tax Map Number(s): _____ Zoning District: _____

Flood Zone: _____

**(If located within a Regulated Flood Zone, the RV must be moved every 180 days.)*

APPLICANT INFORMATION

Name: _____

Mailing Address: _____

Telephone: _____ Alternate Number: _____

Email Address: _____

Legal relationship of Applicant to Property Owner: _____

(If the application is not signed by the property owner, an Owner Request Form must be attached.)

PROPERTY OWNER INFORMATION

Name: _____

Mailing Address: _____

Telephone: _____ Alternate Number: _____

Email Address: _____

Signature of Applicant/Date

Printed Name of Applicant

Signature of Owner/Date

Printed Name of Owner



Planning and Development Department Residential Electrical Trade Application

Applicant Name _____ Phone _____ Email _____

Project Address _____ City _____ NC ZIP _____

Subdivision or Project Name _____ Lot Number _____

Project Contact Person _____ Phone _____ Fax _____

Email _____ Contact preference: Phone Fax Email

Property Owner _____ Phone _____ Email _____

Address _____ City _____ State _____ ZIP _____

Directions to address _____

Description of Work _____

Proposed Use _____

WORK DETAILS

Single Family Townhouse Two-Family Rental Yes No

Type of work: Add-New Relocate Repair Replace

Electrical Information

Service-Power Pole to be used for _____

Existing Service Size _____ amps Number of panels _____ New or Upgraded Service Size _____ amps

Total SqFt (Required for any new wire installation) _____ Electrical Cost of Project _____

ELECTRICAL Contractor Information

- Contractor (Company Name) _____ Phone _____
- Address _____ City _____ State _____ ZIP _____
- License Number _____ Expiration _____
- Email _____ Classification: Limited Intermediate Unlimited Owner Other
- Authorized Agent (print) _____ Signature _____ Date _____

APPLICANT STATEMENT

I hereby certify that all information in this application is correct and all work will comply with the State Building code and all other applicable State and local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

Applicant Name (print) _____ Signature _____ Date _____