



# Town of Carthage

4396 Hwy 15/501 ♦ Carthage, NC 28327

Phone: 910.947.2331 ♦ Fax: 910.947.3079

[www.TownofCarthage.org](http://www.TownofCarthage.org)

Fee: \$ \_\_\_\_\_

Email Completed Form to: [jmsandoval.admin@townofcarthage.org](mailto:jmsandoval.admin@townofcarthage.org)

## New Construction Application

Applicant's Name: \_\_\_\_\_

Email: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Applicant's Phone: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_

**The address for the proposed project is (if other than above):** \_\_\_\_\_

This is to certify that \_\_\_\_\_ has applied to the Town of Carthage for a development permit to do one of the following and by signing take full responsibility for further action, if needed, for a building inspection from Moore County or any other permits:

- ☐ Install a new construction home      ☐ Addition (Change in footprint)
- ☐ Addition (No change in footprint)
- ☐ Other

Please describe the new construction below:

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***\*Additional space for drawing or site plan is on the following page. The applicant may use GIS for the site plan. The applicant may also be required to provide images of the accessory structure by the Development Administrator.***

**Each application MUST be accompanied by a SITE PLAN or DRAWING to include specific information regarding the following:**

- Height of the proposed and/or existing structure and property lines.
- Distances between proposed and/or existing structure(s) and property lines.
- Dimensions of proposed structure(s)
- Type of materials (metal, vinyl, masonry, etc.) to be used in proposed structures.

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Applicant Signature

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Date

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Property Owner/Authorized Rep. Signature

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Date

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**FOR OFFICE USE ONLY**

Development Administrator Comments:

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Parcel ID: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Zoning Classification: ☐ CZ      ☐ RA-40   ☐ R-20      ☐ R-10   ☐ RM-10      ☐ RM-H   ☐ R-HD

☐ CBD   ☐ B2   ☐ TBD   ☐ HCD   ☐ AP   ☐ SR      ☐ I

Required Setbacks:              Front: \_\_\_\_\_      Side: \_\_\_\_\_      Rear: \_\_\_\_\_

   Corner: \_\_\_\_\_      Max Height: \_\_\_\_\_

**Based upon the provided information, a Development Permit is granted this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by the Authority of the DEVELOPMENT Administrator of the Town of Carthage, NC.**

**Stamp of Approval or Denial**

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Town of Carthage Development Administrator

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Date