



TOWN OF MONTREAT

ZONING AND INSPECTIONS DEPARTMENT  
P. O. Box 423  
Montreat, NC 28757  
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Fax: (828)669-3810  
[www.townofmontreat.org](http://www.townofmontreat.org)

**DRIVEWAY CONNECTION APPLICATION**

PERMIT #: \_\_\_\_\_  Residential  Commercial  Flood Zone

Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Owner Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Project Address: \_\_\_\_\_ PIN #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contractor Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

License #: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Current/Proposed Use: \_\_\_\_\_

Required Parking Spaces: \_\_\_\_\_ Total Site Acreage: \_\_\_\_\_

Total Area to be Disturbed: \_\_\_\_\_

Description of Proposed Driveway & Parking Accommodations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Give brief description and attach copy of plan to application)

\_\_\_\_\_

(Applicant's Signature)

Date

**FOR OFFICE USE ONLY**

Permit Fee: \$ \_\_\_\_\_ Cash: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Date Paid: \_\_\_\_\_

(PERMIT APPROVAL DATE)	BUILDING INSPECTOR SIGNATURE
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- Improvements within Town rights-of-way are permitted only for approved connections to public streets.
- All qualifying grading and development activities are subject to the requirements of Montreat Stormwater Management Ordinance.
- No ground disturbing activities may take place in a designated Special Flood Hazard Area as delineated by FEMA in its Flood Insurance Rate Map (FIRM) without first obtaining a Floodplain Development Permit.
- Soil and erosion controls should be utilized at all times.