



Request for Use Verification for Electrical Service Reconnection

Development
Services Center

City-County Development Services Center

101 City Hall Plaza, Durham, NC 27701 | <https://dsc.durhamnc.gov> | 919-560-4137

Date: _____ Service Address: _____

Name of Business: _____

Previous Use: _____ Proposed Use: _____

Applicant Name: _____ Email: _____

Applicant Address: _____

Applicant Phone: _____ Phone 2: _____

Note: Please read and sign affidavit on the next page and email the request to: dscticket@dsc.mojohelpdesk.com

Please allow up to 48 hours for the background check for this site. You will be notified when this letter is ready for pick up or if there are other questions from staff

PLANNING STAFF USE

PID: _____ PIN: _____ Zoning: _____

Overlay: _____ Jurisdiction: _____

- Property is located in the appropriate zoning district; proposed use meets all local zoning and other Unified Development Ordinance (UDO) requirements.

Power CAN be authorized with Durham City-County Inspections Department approval.

- Property is located in the appropriate zoning district but requires the following approval(s) before unconditional power approval can be restored and proposed use commenced:

Site Plan

Special Use Permit

Certificate of Appropriateness

Temporary Use Permit

CONDITIONAL power CAN be authorized with Durham City-County Inspections Department approval and the conditions contained in the attached affidavit.

- Property is not located in an appropriate zoning district; proposed use requires rezoning of subject property.

Power restoration CANNOT be authorized until all required zoning approvals are obtained.

Signature

Date

APPLICANT AFFIDAVIT

REQUEST FOR USE VERIFICATION FOR ELECTRICAL SERVICE RECONNECTION

I understand that Planning Staff is making a determination regarding the validity of the proposed use of the building(s) under the Durham Unified Development Ordinance (UDO) listed on the attached "Request for use verification for electrical service reconnection" form based on the information I am providing. Should additional information become available to staff that conflicts with this information, the determination above will be invalid and this authorization rescinded.

I further understand that if Conditional Power is authorized by the Durham City-County Inspections Department:

- 1) The building listed on the attached form may only be occupied for interior demolition, real estate showings for sale and/or rental, security, and other interior building renovations; and that no business operations may commence. The undersigned further acknowledges that some building renovations may require approval of the Durham City-County Inspections Department; and
- 2) A complete application for _____ and all associated fees must be submitted to the Durham City-County Planning Department by _____ (date); and
- 3) The application(s) listed in item #2 above must remain active and under review or approved.

If any of the aforementioned conditions are violated, the undersigned and/or the owner of the building on the property listed on the attached form will be in violation of the UDO and may be subject to enforcement options specified in the UDO.

Applicant Signature: _____

Applicant Printed Name: _____

Applicant Signature Date: _____

Received by:

Planning Staff Signature: _____

Planning Staff Printed Name: _____

Planning Staff Signature Date: _____