

(eff.08/22)

**TOWN OF LAKE LURE  
LAND DISTURBANCE PERMIT  
(LESS THAN 1 ACRE)**

**Permit Fee** \_\_\_\_\_  
**(see Fee Schedule below)**

**Permit No. LDP-** \_\_\_\_\_

Approved: _____	_____
Expiration Date: _____	Erosion Control Officer
Rejected: _____ (see attached explanation)	Date: _____

**Please fill out form completely.**

**FINANCIALLY RESPONSIBLE PARTY:**

Is applicant a resident of North Carolina? Yes \_\_\_\_\_ No \_\_\_\_\_ (if No, include agent contact information and notarized Agent form from pages 5-6.)

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

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

Daytime Phone: \_\_\_\_\_ Date of application: \_\_\_\_\_

**REASON FOR REQUEST (Check all that apply)**

New subdivision \_\_\_\_\_ Land clearing \_\_\_\_\_ New road \_\_\_\_\_ Structure \_\_\_\_\_  
Driveway \_\_\_\_\_ Other (specify) \_\_\_\_\_

**INFORMATION REGARDING PROPERTY TO BE IMPROVED:**

Street name \_\_\_\_\_ Map Page \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Owner \_\_\_\_\_ Parcel # \_\_\_\_\_

Address \_\_\_\_\_ Current zoning \_\_\_\_\_

\_\_\_\_\_ Lot area \_\_\_\_\_

\_\_\_\_\_ Square foot area \_\_\_\_\_  
of disturbance

<b>Fee Schedule:</b>	
Less than 2,000 sq. ft. of disturbed area _____	No permit required
100 sq. ft. to < 2,000 sq. ft. of disturbed area w/in 35' of a watercourse _____	\$15.00
2,000 sq. ft to 10,000 sq. ft. of disturbed area _____	\$160.00
Over 10,000 sq. ft. of disturbed area _____	\$160.00/10,000 sq. ft.

**MEASURES PROPOSED TO PREVENT EROSION:**

---

---

---

---

---

---

---

**Approval of land disturbance permits for less than one acre requires submission of a minor erosion control plan. Using the checklist provided, please attach the following information and materials to this application for review by the Erosion Control Officer. Failure to provide this information will result in disapproval of the application.**

**A Minor Erosion Control Plan must contain the following:**

- \_\_\_ 1. A location map showing and identifying roads.
  
- \_\_\_ 2. Either a certified copy of a survey or a copy of the tax maps showing the actual property which is the subject of the application.
  
- \_\_\_ 3. A sketch plan drawn to scale showing the following:
  - \_\_\_ a) Boundaries and topography of the property including existing and proposed site conditions (buildings, streets, driveways, parking lots, utilities, setbacks, watercourses, and other features affecting stormwater runoff and management, etc.)
  - \_\_\_ b) Offsite conditions (drainage areas, lakes, and streams)
  - \_\_\_ c) Area to be disturbed (building footprint, access roads, graded surfaces, cut and fill slopes, etc.)
  - \_\_\_ d) Stormwater systems (catch basins, inlets, culverts, swales, ditches, and channels)
  - \_\_\_ e) Stream crossings (if applicable)
  - \_\_\_ f) Temporary and permanent sedimentation and erosion control measures (locations and dimensions of gravel entrances, diversion ditches, silt fences, sediment basins, velocity dissipators, ditch lining, retaining walls, etc.)
  - \_\_\_ g) Construction sequence (permits, installation of measures, inspections and approvals, maintenance of measures, ground cover, and removal of measures after stabilization)
  - \_\_\_ h) Temporary and permanent seeding plans (seed bed preparation, fertilizer and lime rates, seeding schedule and rates, mulch and tack materials and rates)
  
- \_\_\_ 4. Agent Authorization Form if financially responsible party is not a North Carolina resident (must be signed by the property owner, dated, and notarized in order to be considered valid.) Authorized agent must be a North Carolina resident.
  
- \_\_\_ 5. Such other documents as may be requested by the Erosion Control Officer to ensure compliance with the Lake Lure Sedimentation Control Ordinance.

**NOTE:**

All temporary erosion control measures must be inspected and maintained weekly and after every rainfall event exceeding ½ inch. Temporary ground cover must be established within 21 days of completion of any phase of grading. Permanent ground cover must be established within 90 days of completion of the project.

Section 22-23(b)(3) of the Town of Lake Lure Soil Erosion and Sedimentation Control Regulations states that plans may be disapproved unless accompanied by an authorized statement of financial responsibility and ownership. This statement shall be signed by the person financially responsible for the land-disturbing activity or his/her attorney in fact for the purpose of receiving notice of compliance or non-compliance with the Plan, the Act, this ordinance, or rules or orders adopted or issued pursuant to this ordinance. The undersigned states that he/she is the person financially responsible for land-disturbing activity described in this application.

*I understand that as the applicant, I am assuming financial responsibility for any damage to adjacent property, including property of the Town of Lake Lure, from erosion caused by land disturbing activity on the property which is the subject of this permit. In the event sediment is deposited onto town property, I will cause the sediment to be removed at my expense within 24 hours or, failing this, will reimburse the town for said removal.*

Name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Section 22-23(b)(3) of the Town of Lake Lure Soil Erosion and Sedimentation Control Regulations states that if the person financially responsible is not a resident of North Carolina, a North Carolina agent must be designated in the statement for the purpose of receiving notice of compliance or non-compliance with the Plan, the Act, this ordinance, or rules or orders adopted or issued pursuant to this ordinance.

*I understand that as the authorized agent, I am assuming financial responsibility for any damage to adjacent property, including property of the Town of Lake Lure, from erosion caused by land disturbing activity on the property which is the subject of this permit. In the event sediment is deposited onto town property, I will cause the sediment to be removed at my expense within 24 hours or, failing this, will reimburse the town for said removal. IF AGENT, MUST INCLUDE AGENT/FINANCIAL RESPONSIBILITY FORM (pages 5-6)*

Name of Agent \_\_\_\_\_

Signature of Agent \_\_\_\_\_ Date \_\_\_\_\_

**Tree Protection Site Plan Checklist**  
*Section 36-262(b) of the Lake Lure Zoning Regulations*

**Name of Applicant:** \_\_\_\_\_

**Zoning Compliance Permit No.:** \_\_\_\_\_

Site plan is to be a topographic survey of the subject property and shall contain the following:

- \_\_\_\_\_ Scale (see section 36-262(b) of the Zoning Regulations)
- \_\_\_\_\_ Property lines and setback lines
- \_\_\_\_\_ Adjoining roads
- \_\_\_\_\_ Any water courses or bodies of water within or adjoining the subject property
- \_\_\_\_\_ Estimated forest coverage before and after any land clearing and replanting
- \_\_\_\_\_ Location and footprint of all proposed structures and other improvements
- \_\_\_\_\_ 10 foot perimeter boundary around all structures and parking areas (for 5 cars or more)
- \_\_\_\_\_ Location of additional areas proposed for clearing or thinning
- \_\_\_\_\_ Location of parking lots including areas of green spaces
- \_\_\_\_\_ Location of all forest areas (must be designated for protection, thinning or removal)
- \_\_\_\_\_ Location of all significant trees (must be designated for protection or removal)
- \_\_\_\_\_ Location of all areas of native shrubbery exceeding 100 square feet (must be designated for protection or removal)
- \_\_\_\_\_ Location, size, and species of trees and/or shrubs to be planted at the direction of the tree protection officer
- \_\_\_\_\_ Location and nature of tree protection measures to be installed
- \_\_\_\_\_ Steep slope plan, if needed
- \_\_\_\_\_ Seals or signatures of any professionals involved in preparation or review of the site plan

REVIEWING OFFICER'S NOTES:

---

---

---

---

---

---

---

SITE PLAN REVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**TOWN OF LAKE LURE**  
**AGENT AND/OR ACCEPTANCE OF FINANCIAL RESPONSIBILITY FORM**  
**(page 1)**

INSTRUCTIONS: Complete ALL sections IF "Agent" on page 3. Page 6 must be completed in presence of Notary Public.

**1) Project Information:**

Project Name: \_\_\_\_\_

Project Location: \_\_\_\_\_

Property ID # (Tax PIN): \_\_\_\_\_ Map Page \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Total Disturbed Area: \_\_\_\_\_

**2) Owner Information:**

§22-23(b)(3) of the Town of Lake Lure Soil Erosion and Sedimentation Control ordinance states that “Plans may be disapproved unless accompanied by an authorized statement of financial responsibility and ownership. This statement shall be signed by the person financially responsible for the land disturbing activity or his/her attorney in fact.” *The undersigned states that he/she is the owner of the land described in this application.*

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

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

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By (if attorney in fact): \_\_\_\_\_ Date: \_\_\_\_\_

**3) Agent Information and/or other Person Financially Responsible for Land Disturbing Activity:**

§22-23(b)(3) of the Town of Lake Lure Soil Erosion and Sedimentation Control ordinance states that “Plans may be disapproved unless accompanied by an authorized statement of financial responsibility and ownership. This statement shall be signed by the person financially responsible for the land disturbing activity of his/her attorney in fact.” *The undersigned states that he/she is either acting on behalf of the owner and accepts financial responsibility for the land disturbing activity or is otherwise accepting financial responsibility for the land disturbing activity.*

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

Company/Business (if applicable): \_\_\_\_\_

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

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TOWN OF LAKE LURE**  
**AGENT AND/OR ACCEPTANCE OF FINANCIAL RESPONSIBILITY FORM**  
**(page 2)**

Rutherford County  
State of NC

**Notary Certification:**

The individual named below states that the information provided in Sections 1-3 is correct to the best of his/her knowledge.

Agent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title (if applicable): \_\_\_\_\_

Signature: \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public for the County of \_\_\_\_\_

State of \_\_\_\_\_, hereby certify that \_\_\_\_\_  
personally appeared before me this day and under oath acknowledged that the above form was executed by  
him/her and is correct to the best of his/her knowledge and belief.

Witness my hand and seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary \_\_\_\_\_

My Commission Expires: \_\_\_\_\_