CITY OF ASHEVILLE
FLEXIBLE DEVELOPMENT APPLICATION

SUBMIT TO: PLANNING AND DEVELOPMENT DEPARTMENT
5TH FLOOR, ASHEVILLE CITY HALL
PO BOX 7148, ASHEVILLE, NC 28802 828-259-5830

Application Date _____ Zoning District _____

Project Name _____ PIN# _____

Property Address/Location _____

FLEXIBLE DEVELOPMENT REQUESTED

_ Building Setbacks: Required: Front _____ Side _____ Rear _____
Requested: Front _____ Side _____ Rear _____
_ Parking: #Required Spaces _____ #Requested Spaces _____
_ Lot Size: Min. Required _____ Requested _____
_ Lot Width: Min. Required _____ Requested _____
_ Landscaping: Alternative Compliance (submit landscape plan and letter describing proposed amendments to landscaping requirements and justification)

Comments (describe project, need for amendment and justification)

_____

_____

_____

_____

_____

Property Owner _____ Phone _____
Address _____ City _____ State _____ Zip _____
Contact For Project _____ Phone _____ Fax _____
Address _____ City _____ State _____ Zip _____

_____ _____
Signature of Applicant Print Name

_ APPROVED Comments: _____

_ DENIED _____ _____
Signature of Reviewer Date