

EnerGov Case #: _____

RP File: _____

NO FEE

SANFORD / LEE COUNTY / BROADWAY

FAMILY CARE HOME APPLICATION



115 Chatham Street, Sanford, NC 27330

919.718.4656

zoning@sanfordnc.net

This application pertains to Community Development Department regulations **only**. It is the responsibility of the applicant to verify that the proposed use is in compliance with all **other applicable government agencies**, including—but not limited to—Building Inspections (919-718-4654), the Fire Department (Sanford Fire Marshal: 919-777-1300; Lee County Fire Marshal: 919-718-4670), and Lee County Environmental Health (919-718-4641). Compliance with these other departments/agencies must be verified before commencing the family care home use.

Submit this application online at: www.sanfordnc.net/843/Online-Application-Site-Plan-Submittals

Name of Facility: _____

Address of Facility: _____

Applicant Name: _____ Phone: _____

Mailing Address: _____ Email: _____

I hereby certify that I understand that the above referenced property, identified as Lee County Tax Parcel _____ is currently zoned _____. This zoning district allows for Family Care Homes just as it does any single-family dwelling unit under normal review requirements without a special or conditional use permit. I also certify that the Family Care Home, doing business as _____ at this location meets all requirements of the facility in accordance with NC G.S. § 168-20-22, such that no conditional use permit or zoning variance shall be required. Further, the facility shall meet and adhere to the provisions of NC G.S. § 168-21 which set forth as follows:

“Family care home” means a home with support and supervisory personnel that provides room and board, personal care and habilitation services in a family environment for not more than six resident handicapped persons.

“Handicapped person” means a person with a temporary or permanent physical, emotional, or mental disability including but not limited to mental retardation, cerebral palsy, epilepsy, autism, hearing and sight impairments, emotional disturbances, and

orthopedic impairments but not including mentally ill persons who are dangerous to others as defined in NC G.S. § 122C-3(11) b.

Local zoning regulations are applicable as they pertain to any single-family residential uses and development. Sanford/Lee County Planning Department should be contacted for any change of use or any additional development on the property, renovations of existing structures, and additions to existing structures whether interior or exterior.

Further, I certify that I understand the above stated rules, regulations and definitions as they pertain to the location and operation of a Family Care Home, and assume full responsibility for screening and determining whether each individual resident is harmful to himself/herself or to others.

Applicant's Name (Print): _____

Applicant's Signature: _____ Date: _____

Property Owner's Name (Print): _____

Property Owner's Signature: _____ Date: _____

STAFF USE ONLY

Date Received: _____ Date Reviewed: _____

Parcel ID #: _____ Zoning District: _____

Jurisdiction (circle): Sanford Lee County Broadway

Request: Approved Denied (circle) Staff Signature: _____

Staff Notes: _____
