



City of Lincolnton Planning & Zoning
 114 W Sycamore St
 P.O. Box 617 Lincolnton, NC 28093
 Phone: 704-736-8930
 zoningpermits@lincolntonnc.org

DOCUMENT INTAKE FORM

A completed form is required for all documents (excluding permit applications) submitted to the Planning Department.

Document Type / Title: _____

First Submittal? Review Number: _____

Any plans submitted for review should also have a digital version emailed to zoningpermits@lincolntonnc.org

Applicant (drop off):

Owner Information (if different):

Name:	Name:
Company:	Phone:
Phone:	Email:
Email:	

Who should staff contact? (circle one):

Applicant

Property Owner

Preferred method (circle one) :

Email

Phone

I acknowledge that the contact provided above will be contacted regarding any required fees or missing documents and that this submission is not considered complete until all have been received.

Signature

Date

Notes:

OFFICE USE:

Application received by: _____ Date: _____ Time: _____

Review Deadline: _____ Review Fee: _____ Date Paid: _____

Digital version received: _____ Email Sent: _____

Missing Documents: _____