



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 applications) submitted to the Planning Department.

Document Type / Title: _____

Sketch Plan Preliminary Plat Final Plat Construction Documents Site Plan Other

First Submittal? Review Number: _____

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

Applicant (or drop off):

Owner Information (if different):

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

Contact for payment (if not included)?: Applicant Property Owner Other

Contact for missing documents and/or review comments? Applicant Property Owner Other (add in notes)

I acknowledge that the above-listed will be contacted regarding any required fees, missing documents, and/or review comments, and that this submission is not considered complete until all items have been received.

 Signature

 Date

Please add the name and email address of any additional contacts who should be included in review comments below

Notes:

OFFICE USE:

Application received by: _____ Date: _____ Time: _____

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

Digital version received: _____ Email Sent: _____

Missing Documents: _____