

Department of Planning and Development

Phone: 910 254-0900 | Fax: 910 341-3264

Dial 711 TTY/Voice

ANNUAL ZONING PERMIT APPLICATION

Sexually-Oriented Business

DATE:			ZONING DISTRICT:		
PERMIT NUMBER:			APPROVED BY:		
169 Se	xually- de sect	oriented business (SOB). A Si ion 18-633 and failure to rend	\$25.00 Zoning Permit fee is rec	Fice annually pursuant to City Code Section 18- juired. Nonconforming uses shall be subject to all constitute a discontinuance of the	
Sexual	ly-orie	nted business			
a. Any applicant for a zoning permit shall disclose, as part of the permit application, any crimina other than minor traffic offenses, of the operator and all employees of such business.b. No zoning permit shall be approved if any operator or employee of such establishment has any criminal offenses reasonably related to the operation of sexually-oriented businesses.1. Such uses shall not include massage.				ployees of such business. byee of such establishment has any	
	2.	There shall be no visible of the outside of a building.	obscene, explicit, or sexually-or	iented materials, advertisements, or signage on	
	3.	No employee or patron of	such a business shall be young	er than 18 years of age.	
APPLI	CANT	NAME:			
ADDR	ESS:				
TELEPHONE		:	E-MAIL:	Site Plan Y/N	
ADDR	ESS OI	BUSINESS:			

Return all documents:

City of Wilmington
Planning and Development
929 N Front Street, 1st Floor
Wilmington NC 28401