



# City of Boiling Spring Lakes

9 East Boiling Spring Road Boiling Spring Lakes, NC 28461  
Phone ~ 910-363-0025 Fax ~ 910-363-0029 Web page ~ [www.cityofbsl.org](http://www.cityofbsl.org)

---

## ~ Unified Development Ordinance Text Amendment Application ~

Application must be completed in its entirety and accompanied by the appropriate fee(s) and attachments as required on page two of this application. An incomplete application will be returned to the applicant and will result in delays to process the request. An applicant is encouraged to visit the inspections office for a preliminary review of the request.

Date: \_\_\_\_\_

Applicant Name:

---

Mailing Address:

---

Applicant Contact: (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell): \_\_\_\_\_

Type of Change Requested:      New Text      Text Revision

Unified Development Ordinance Article #: \_\_\_\_\_ Section(s): \_\_\_\_\_

Applicant is responsible for submitting the language for the proposed new text or the proposed revisions of text. A separate page may be submitted if needed.

Proposed Language for New Text:

---

---

---

---

---

---

---

Proposed Language for Revised Text:

---

---

---

---

---

---

---

---

Provide Explanation for Proposed Changes:

---

---

---

---

---

---

---

---

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant

---

**Application must be completed in its entirety with the required documents as stated above.  
Application Fee(s) must be remitted with the application.**

---

For Office Use

Date Received:	Received by:	Public Hearing Date:

Action Taken:

---

---

---

---

---

---

---

~~~~~

~ Fee(s) ~

| Fee      | Date Paid | Check # | Credit Card | Cash |
|----------|-----------|---------|-------------|------|
| \$300.00 |           |         |             |      |