



Construction Form Not Requiring Certificate of Zoning Compliance

Date _____

From: Village of Flat Rock Zoning Administration

To: Henderson County Inspections Dept.
240 2nd Avenue East
Hendersonville, NC 28792

Property owner: _____, Tele: _____

Property address: _____

PIN #: _____

Property owner's e-mail: _____

Proposed improvements: _____

(Approval Stamp)

Zoning Administration Remarks:

Zoning staff signature:
