



Cleveland County
NORTH CAROLINA

APPLICATION FOR A NEW RESIDENTIAL CARE FACILITY

Name of Facility: _____

Location Address: _____

Contact phone/ Email: _____

Owner/ Operator: _____

Mailing Address: _____

Contact phone/ Email: _____

Please specify the following:

Sewer: public sewer _____ private septic system _____

Water: public water _____ private water supply _____

*Facilities connected to a private septic system may require an existing systems inspection.

Directions from Shelby:

You will be responsible for obtaining approval from appropriate zoning and building inspection departments. Their numbers are included below to assist you.

ZONING / BUILDING INSPECTION

Shelby 704-484-6805
Kings Mountain 704-734-4599
Cleveland County 980-484-4975/4997

FIRE MARSHALLS

704-484-6816
704-734-0555
704-481-4841

If your business will be located in any jurisdiction other than those listed above, please check with your city manager and/or town hall for permitting assistance.

Date of Application: _____

Signature of Applicant: _____

Applications can be submitted in person or by mail to:
Cleveland County Permits Office
1333 Fallston Road
Shelby, NC 28150