



**Cleveland County**  
NORTH CAROLINA

**APPLICATION FOR LODGING ESTABLISHMENT**

(This includes Hotels, Motels, Bed & Breakfast Homes, Bed & Breakfast Inns)

**Name of Facility:** \_\_\_\_\_

Location Address: \_\_\_\_\_

City: \_\_\_\_\_ State: NC Zip: \_\_\_\_\_

Facility Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

**Owner of Business:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

**Owner of Building:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

**Please specify the following:**

Sewer:  Public/Municipal  On-site Wastewater System

Water:  Public/Municipal  Private Water Supply

Has this facility been permitted before?  Yes  No

If so, name the facility \_\_\_\_\_

Total # of rooms for rent? \_\_\_\_\_

Total # of rooms for private use? \_\_\_\_\_

Will the facility be newly constructed or remodeled? \_\_\_\_\_

Will the facility have food service?  Yes  No

Plans for franchise facilities should be submitted to and reviewed by the:

North Carolina Department of Health and Human Services

Environmental Health Section

Plan Review Unit

5605 Six Forks Rd.

Raleigh, NC 27609

*Review and approval of these plans and specifications by the Cleveland County Environmental Health does not indicate compliance with any other federal, state, or local code, law or regulation. You will be responsible for obtaining approval from appropriate zoning and building inspection departments. Refer to the building inspection department for the requirements of carbon monoxide detectors. 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

980-481-4841

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.

**Proposed opening date:** \_\_\_\_\_

**Date Application Submitted:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

**APPLICATIONS CAN BE SUBMITTED IN PERSON OR BY MAIL TO:**

Cleveland County Permits Office

1333 Fallston Road

Shelby, NC 28150