



# Town of Holly Springs

## Town Council Meeting Agenda Form

Town Clerk's Office Use:

**Agenda Item #:** 9j

**Attachment #:** 5j

**Meeting Date:** May 15, 2018 **Agenda**

**Placement:** Consent Agenda

(Special Recognitions (awards, proclamations), Requests & Communications (reports, information presentations), Public Hearings, Consent Agenda, Unfinished Business, New Business, Closed Session)

**Subject Title:** Budget Amendment- Fee Schedule

**Presenter Name(s):** Gina Clapp

### **SUBJECT HIGHLIGHTS:**

In association with NCGS § 160A-383.5, the Town's Unified Development Ordinance has been amended to allow for Temporary Family Healthcare Homes. The Statute also specifies the fees that a municipality may charge for the issuance of a permit as well as for the annual review and permit renewal. The following fees are in accordance with the State Statutes:

UDO Permits:

Temporary Family Healthcare Home: \$100

Temporary Family Healthcare Home Annual Renewal: \$50

### **ADVISORY BOARD RECOMMENDATION:**

n/a

### **STAFF REVIEW NOTE:**

approve

**Number of Motions with this Item:** 1

### **Suggested motion(s):**

Amend Ordinance #17-05 BUDGET ORDINANCE FY2017-2018 to Amend the Fee Schedule to modify the fees for Planning & Zoning Fees- UDO Permits to add fees for Temporary Family Healthcare Homes.

### **Funds, if applicable, are to be appropriated from account(s) / line item(s):**

n/a

### **Staff Review Record**

Are there exhibits for this agenda item? **No**

List them in order they should appear in packet:

Department head initials and comments, if applicable: gmc

Finance director initials and comments, if applicable:

Town attorney initials and comments, if applicable:

Town clerk initials: jp