



**PITT COUNTY  
PLANNING DEPARTMENT  
DEVELOPMENT SERVICES BUILDING  
1717 W. 5<sup>TH</sup> STREET  
GREENVILLE, NORTH CAROLINA 27834-1696  
TELEPHONE: (252) 902-3250  
FAX: (252) 830-2576**

**JAMES F. RHODES, AICP  
DIRECTOR**

## **Application to Lease Buyout Property**

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

Name: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Address of Buyout Property: \_\_\_\_\_

**Are you the former owner of the property? Yes / No**

**Do you own the adjacent property? Yes / No**

**Do you own property in the vicinity? Yes / No**

**What is the proposed use of the property? (Please be specific):**

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**How do you propose to maintain the property?**

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**Insurance requirement: Be advised that you will be required to keep in full force and effect a policy of general liability insurance with respect to the premises in order to cover any third party claims against you related to the property. Please contact your insurance agent before signing a lease agreement to ensure that you have adequate coverage.**

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

\_\_\_\_\_  
Date