



TOWN OF COATS

ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. This form along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 5-21-21-1 Date: 5/21/21 Fee: \$50

Parcel ID*: 07059990 00 Area Zoned As: R-A

APPLICANT:

PROPERTY OWNER:

Name (Print) DAVID BEASLEY

Name Coats FNB Church

Address P.O. Box 53

Address 1355 NC 55 EAST

City, State Coats NC

City, State Coats, N.C. 27521

Zip Code 27521

Zip Code _____

Phone # 910-891-8026

Phone # 910-891-802

Location of Property: IN-TOWN _____ ETJ ETJ (contiguous) _____

Present Use of Property: _____

PROPOSED USE OF PROPERTY:

- Single Family Dwelling: # Rooms: _____ # Bedrooms: _____ Square Feet: _____
- Multi Family Dwelling: # of Units: _____ #Bedrooms (per unit): _____ Square Feet (per unit) _____
- Mobile Home (single lot): Single wide: _____ Double Wide: _____
- Mobile Home Park: Section 16, Zoning Ordinance must apply
- Business: Total # of employees per day _____ Type of business _____
- Others (specify): 12x24 Outside Storage Bldg.

Existing structure: _____ Renovate: _____ Addition: _____ Demolish: _____

WATER AND SEWER SUPPLY:

Water: Private Public Proposed Existing
 Sewer: Private Public Proposed Existing

Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.

Signature: David E. Beasley

Date: 5-21-2021

ZONING ADMINISTRATOR USE ONLY

Notes: _____

Approved: Denied:

Zoning Administrator: Mike Holak

Date: 5/21/2021

THIS PERMIT IS VALID FOR 12 MONTHS