

COMMERCIAL LAND USE APPLICATION

SITE ADDRESS: 204 E. JACKSON BLVD ERWIN **PIN:** _____
LANDOWNER: GUILLERMO MATEO **Mailing Address:** 91 HICKORY TREE LANE
City: ANGIER **State:** NC **Zip:** 27501 **Phone:** 919 669 4672 **Email:** mateomasonny@ig-mail.com

*Please fill out applicant information if different than landowner.

APPLICANT: ANA MATEO HIDALGO **Mailing Address:** 500 DENIM DR. E
City: ERWIN **State:** NC **Zip:** 28339 **Phone:** 919 413 5129 **Email:** anamatias27501@gmail.com

PROPOSED USE:

- Multi-Family Dwelling:** # Units: _____ # Bedrooms/Unit: _____
- Business:** SQ. FT.: Retail Space 600 Type: SNACK SHOP # Employees: _____ Hours of Operation: _____
- Daycare:** # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry:** SQ. FT.: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church:** Seating Capacity: _____ # Bathrooms: _____ Kitchen: Yes No
- Sign:** (Size _____ x _____) Type: _____ Illuminated: Yes No If yes, Internal External
- Accessory/Addition/Other:** (Size _____ x _____) Use: _____

UTILITIES:

Water Supply: County Existing Well New Well (# of facilities using well _____)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer

(Complete Environmental Health Checklist on other side of application if Septic is selected)

COMMENTS: Retail Snack Shop everything is pre packaged and ready for sale

If permits are granted, I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

GUILLERMO MATEO
Signature of Owner or Owner's Agent

02/10/26
Date

Permits are valid for 6 months from the issue date, or 12 months from last inspection once inspections have been initiated. It is the owner/applicant's responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.



Town of Erwin
Zoning Application & Permit
Planning & Inspections Department

Permit #
26-130

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Ana Matias Hidalgo	Property Owner	Guillermo
Home Address	500 Denim Dr Erwin	Home Address	91 hacrely tree lane Angier
City, State, Zip	Erwin NC 28339	City, State, Zip	Angier NC
Telephone	919 413 5129	Telephone	919-669-4672
Email	anamatiash27501@gmail.com	Email	

Address of Proposed Property		204 E Jackson Blvd Unit A	
Parcel Identification Number(s) (PIN)		Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.		Shack Store - Chap Guate - Mex	
Description of any proposed improvements to the building or property			
What was the Previous Use of the subject property?		SHACK SHOP	
Does the Property Access DOT road? <input checked="" type="checkbox"/>			
Number of dwelling/structures on the property already	1	Property/Parcel size	37000
Floodplain SFHA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Watershed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>MUST</u> circle one that applies to property	Existing/Proposed Septic System <input type="checkbox"/> Or Existing/Proposed County/City Sewer <input checked="" type="checkbox"/>		

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Ana Matias Hidalgo	Ana Matias Hidalgo	02-4-26
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	BA	Existing Nonconforming Uses or Features	setbacks
Front Yard Setback	30 FT	Other Permits Required	<input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input checked="" type="checkbox"/> Fire Marshal <input type="checkbox"/> Other
Side Yard Setback	-	Requires Town Zoning Inspection(s)	<input type="checkbox"/> Foundation <input checked="" type="checkbox"/> Prior to C. of O.
Rear Yard Setback	20 FT	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Fee Paid: <u>none</u>		Date Paid: 2/4/26	Staff Initials: OME

Comments	NO change of building / use. current permit.
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Signature of Town Representative:		Date Approved/Denied:	2/4/26
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* contact Harnett County for development meeting. * Firemarsh
910-895-7525. Will need health department to check
if food prepared & not repackaged. off.