



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.: 5-22-19-1 Date: 5/22/19 Fee: \$50.00

Parcel ID\*: 071600 0262 04 Area Zoned As: R-A

APPLICANT:

PROPERTY OWNER:

Name (Print) Ron E. Barefoot

Name Same As Applicant

Address 5159 Nc. 27 E.

Address

City, State Coats NC

City, State

Zip Code 27521

Zip Code

Phone # 919 634-2009

Phone #

Location of Property: IN-TOWN ETJ [checked] ETJ (contiguous)

Present Use of Property: Residential

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
[X] Others (specify): Inground Pool
[ ] Existing structure: Renovate: Addition: Demolish:

WATER AND SEWER SUPPLY:

Water: [ ] Private [X] Public [ ] Proposed [ ] Existing
Sewer: [X] 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: [Handwritten Signature]

Date: 5-22-2019

ZONING ADMINISTRATOR USE ONLY

Notes: 6' security fence, rear yard

Approved: [X] Denied: [ ]

Zoning Administrator: Nick Helander

Date: 5/22/19

APPROVED
TOWN OF COATS ZONING
VALID FOR 12 MONTHS

THIS PERMIT IS VALID FOR 12 MONTHS