

## Town of Erwin Zoning Application & Permit

Rev Sep2014

Planning & Inspections Department

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	Clayton Britt and Sons, Inc	Property Owner	Neil and Lisa Avery
Home Address	PO Box 29	Home Address	228 Armstrong Street
City, State, Zip	Fayetteville NC 28302	City, State, Zip	Dunn NC 28334
Telephone	910.868.1270	Telephone	910.897.8137
Email	mbhaire@spaandpoolworld.com	Email	avery.lisa@gmail.com

Address of Proposed Property	228 Armstrong Street Dunn NC 28334					
Parcel Identification Number(s) (PIN) 0596-45-1610					Estimated Project Cost	\$143,000.00
What is the applicant requesting to the proposed use of the subject pro	build / perty?	D .c.	In gro	und con	crete swimming poo	
Description of any proposed improvem to the building or property		none				
What was the Previous Use of the subject property?			Residential			
Does the Property Access DOT road?			No			
Number of dwelling/structures on the property already			1		Property/Parcel size	5.36
	Waters	hed Yes	No	Wetlan	ds Yes VNo	
MUST circle one that applies to propert	W.	isting/Propose	_	198	n Or	

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/b review this request/and conduct a site inspection to ensure compliance

Mary Beth Haire	ETT auf &		11/05/2020		
Print Name	Signature of Ormer	or Representative	Date		
For Office Use	\ K /	14			
Zoning District	Existing Noneonform	ing Uses or Feature	4		
Front Yard Setback	Other Permits Requir	edCondition	al Use _Building _Fire Marshal _O	ther	
	Requires Town Zoni	ng Inspection(s)	FoundationPrior to C. of O.		
Side Yard Setback	Zoning Permit Status	Approv	edDenied		
Rear Yard Setback	Fee Paid: 25	Date Paid:	Staff Initials:	Staff Initials:	
Comments					
	0				

- ROOI Must be in 1800 your set backs - 101 for sive out 1800 your - Ferre must be installed