



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.: 3-24-22-1 Date: 3/24/22 Fee: \$50

Parcel ID*: 07069016300002 Area Zoned As: R-6-RD

APPLICANT:

PROPERTY OWNER:

Name (Print) Jorge Lugo
Address 130 S Isabella
City, State Coats
Zip Code 27521
Phone # 702-823-8414

Name Same
Address
City, State
Zip Code
Phone #

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

Present Use of Property:

PROPOSED USE OF PROPERTY:

[X] Single Family Dwelling: # Rooms: 5 # Bedrooms: 1 Square Feet: 1000
[] 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): Repair plumbing and electrical
redo the shed roof
[] Existing structure: Renovate: Addition: Demolish:

WATER AND SEWER SUPPLY:

Water: [] Private [X] Public [] Proposed [] Existing
Sewer: [] Private [X] 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: [Signature] Date: 03-24-2022

Notes: minimum bathroom extension off rear of home. ZONING ADMINISTRATOR USE ONLY

Approved: [X] Denied: []

Zoning Administrator: [Signature] Date: 3/24/22

APPROVED TOWN OF COATS ZONING VALID FOR 12 MONTHS

THIS PERMIT IS VALID FOR 12 MONTHS