



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.: 12-8-22-1 Date: 12/8/22 Fee: 450 (paid 10/10/22)
 Parcel ID*: 07069015030005 Area Zoned As: MU-2/6L

APPLICANT:

PROPERTY OWNER:

Name (Print) James D. Hartman
 Address 295 Briar Creek Ln.
 City, State Coats
 Zip Code 27521
 Phone # 407-509-8683

Name Same
 Address _____
 City, State _____
 Zip Code _____
 Phone # _____

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

PROPOSED USE OF PROPERTY:

Single Family Dwelling: # Rooms: 6 # Bedrooms: 3 Square Feet: 1200
 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): _____

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: James D. Hartman Date: 12-8-22

ZONING ADMINISTRATOR USE ONLY

Notes: Repairs
 Approved: Denied:
 Zoning Administrator: Mark Holak Date: 12/8/22

THIS PERMIT IS VALID FOR 12 MONTHS