



Town of Erwin
Zoning Application & Permit
Planning & Inspections Department

Permit #

Rev 8/2014

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	Paul Kim Blankenship	Property Owner	
Home Address	109 March St	Home Address	
City, State, Zip	Dunn NC	City, State, Zip	
Telephone	919 977 0346	Telephone	
Email	Kimandshelby50@gmail.com	Email	

Address of Proposed Property: 760 Burton Ave Erwin NC
 Parcel Identification Number(s) (PIN): 1507-50-709.000 Estimated Project Cost: 180,000

What is the applicant requesting to build / what is the proposed use of the subject property? Be specific. Place a new manufactured home on lot

Description of any proposed improvements to the building or property: _____

What was the Previous Use of the subject property? _____

Does the Property Access DOT road? Yes

Number of dwelling/structures on the property already 0 Property/Parcel size .50

Flood plain SFHA Yes No Watershed Yes No Wetlands Yes No

MUST circle one that applies to property Existing/Proposed Septic System Or Existing/Proposed County/City Sewer

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the foregoing 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.

Print Name: Paul Blankenship Signature of Owner or Representative: [Signature] Date: 12-2-22

For Office Use

Zoning District: _____

Front Yard Setback: _____

Side Yard Setback: _____

Rear Yard Setback: _____

Existing Nonconforming Uses or Features: _____

Other Permits Required: Conditional Use Building Fire Marshal Other

Requires Town Zoning Inspection(s): Foundation Prior to C. of O.

Zoning Permit Status: Approved Denied

Fee Paid: N/A Date Paid: _____ Staff Initials: _____

Comments: new class A manufacture home follow all surviving

Signature of Town Representative: [Signature] Date Approved/Denied: 12/15/22 1,131ed

- please contact Harnett County Developer mens part service to obtain permits 910-843-7525 is attached

- please let me know what date your foundation inspection will be to ensure it is placed on site

Final Plan