

## Town of Erwin

## Zoning Application & Permit

Planning & Inspections Department

Permit # ZY-0166

Rev Sep2014

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

dimensions.						
Name of Applicant	James	3 David Carroll	Property Owner	Robbin 1 Samantha God		
Home Address	140 Corvina drive		Home Address	400 Mason drive		
City, State, Zip	1 1	C 22520	City, State, Zip	Erwin NC 250 28339		
Telephone	919 9015830		Telephone	919-818-1823		
Email		dge builds com	Email			
A 11 (D		,		0.000		
Address of Proposed			dr. Equin	28339	110 23011	
Parcel Identification				ed Project Cost		
What is the applicant		build / what is	Rebuilding to	Same Footp	rint	
the proposed use of t						
Description of any prop	_	nents Rebuild	to Like mak	erials		
to the building or prope What was the Previo		ubject property?	Home 3F	sed room		
Does the Property Ac			Yes	500,100		
Number of dwelling/				rty/Parcel size		
Floodplain SFHA		WatershedYes	No Wetlands	Yes No	I.	
MUST circle one that a				Or		
			d County/City Sewer			
		Owner/Applicant M	lust Read and Sign			
he undersigned propert	tv owner, or dul	y authorized agent/repre	esentative thereof certifi	ies that this applica	tion and the forgoing	
		ion herewith submitted a				
		erstands that any incorre				
		it, the undersigning party				
		North Carolina regulating own of Erwin to review (				
ne undersigning party a this application as app		owit of Etwill to feview (	Ins request and conduc	it a site hispection t	o ensure compnance	
_	4	1 000	? W	- 1:	104	
James D Car	MOM	James N.	<b>D</b>		1-24	
Print Name		Signature of Owner of	r Kepresentative	Date		
or Office Use				10. 4		
Zoning District Existing Nonconforming Uses or Features						
Front Yard Setback	354	Other Permits RequiredConditional Use _Building _Fire MarshalOther Requires Town Zoning Inspection(s)FoundationPrior to C. of O.				
	-				rior to C. of O.	
Side Yard Setback	10 BH	Zoning Permit Status				
Rear Yard Setback	92 tt	Fee Paid: 😘 🐧	Date Paid: NA	Staff Initials:	DE	
Comments						
Signature of Town Repr	resentative:	Thurs	_ Date Ap	Date Approved/Denied: 7/4/24		
		ye or			Jule	
	6	/				