

Town of Erwin Zoning Application & Permit

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

	oposed buildin	ngs, parking and loadi	ng areas, access drive	es and front, rear,	and side yard
dimensions.	1	h Alik	Property Owner	50 0	
Name of Applicant Home Address	thon a	horaytini	Home Address	Same	-
	EBOON	110270			
City, State, Zip	Cruin	NC 2833°			
Telephone	910-89	7-5408	Telephone		
Email	alanp.	eg Zua,	Email	,	
Address of Proposed	Property	gotoo. c	~	ON 11th.	St Erwin MC
Parcel Identification	Number(s) (PII	N) 0597	- 15 Estimat	ed Project Cost	12,000.00
What is the applican			448	7	<i>'</i>
the proposed use of	the subject prop	perty? Be specific.	storage	hlds	
Description of any prop to the building or prop		ents gard	en	8	
What was the Previous Use of the subject property?					
Does the Property Access DOT road?					
Number of dwelling/structures on the property already Property/Parcel size . 27 acres					
Floodplain SFHAYesNo WatershedYesNo WetlandsYesNo					
MUST circle one that applies to property					
Existing/Proposed County/City Sewer					
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 to review this request and conduct a site inspection to ensure compliance					
to this application as approved.					
MARGARET L. WHITE Margaret Lufture 12-23-2024 Print Name Signature of Owner of Representative Date					
For Office Use					
Zoning District	MMV	Existing Nonconformi	ng Uses or Features	aned to ci	BE to property line
					ire MarshalOther
	106+	Requires Town Zonir	ng Inspection(s)	Foundation P	rior to C. of O.
Side Yard Setback	100+	Zoning Permit Status	Approved	Denied	10
Rear Yard Setback	10Pt	Fee Paid: \$25	Date Paid: 122/24 Staff Initials:		
Comments building from Homett county, build onto exhibiting stred					
Signature of Town Rep	resentative:	John	_ Date	proved/Denied:	12/23
PAID					
. correct facodes 3 faraotion DEC 23 2024 Cho					
DEC 2.3 2024 MA					