



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.: 032417-1 Date: 3/24/17 Fee: 50.40	
Parcel ID*: 0690-95-2749. 00	Area Zoned As: R-70
APPLICANT:	PROPERTY OWNER:
Name (Print) Craig Mathews Realty Inc	Name Craig T. Matthews
Address <u>PO BOX</u> 399	' 1 1/ 0/
City, State Coats M 27521	City, State Coats NC
Zip Code 27521	Zip Code <u>2752</u>
Phone # 910 890 4330	Phone # 910 890 4330
Location of Property: IN-TOWN	ETJ (contiguous)
Present Use of Property: Vacant 10t	
PROPOSED USE OF PROPERTY:	
[ ] Single Family Dwelling: # Rooms: # I   [ ] Multi Family Dwelling: # of Units: # I   [ ] Mobile Home (single lot): Single wide: I   [ ] Mobile Home Park: Section 16, Zoning Ordina   [ ] Business: Total # of employees per   [ ] Others (specify):	ance must apply
[ ] Existing structure: Renovate:	Addition: Demolish:
WATER AND SEWER SUPPLY:	
Water: [ ] Private [ ] Sewer: [ ] Private [	Public [ Proposed [ ]Existing ] 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:	
ZONING ADMINISTRATOR USE ONLY Notes:	
Zoning Administrator: Town of COATS ZONIN	Denied: [ ]  Date: 3/24/17