



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

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.

Name of Applicant	Carolyn Dorman	Property Owner	Same CS&D LTD
Home Address	205 Pineview Dr	Home Address	NC
City, State, Zip	Erwin, NC 28339	City, State, Zip	
Telephone	919 894 9714	Telephone	
Email	csdorman123@gmail.com	Email	

Address of Proposed Property	118 Antioch Church Rd, Derna		
Parcel Identification Number(s) (PIN)	0596-87-0192.000	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	Replace well for water consumption		
Description of any proposed improvements to the building or property	Replace well		
What was the Previous Use of the subject property?	Residential		
Does the Property Access DOT road?	yes		
Number of dwelling/structures on the property already	1	Property/Parcel size	.2
Floodplain SFHA <u>Yes</u> No	Watershed <u>Yes</u> No	Wetlands <u>Yes</u> No	
MUST circle one that applies to property	Existing/Proposed <u>Septic System</u> Or 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.

<u>Carolyn S. Dorman</u> Print Name	<u>Carolyn S. Dorman</u> Signature of Owner or Representative	<u>2/25/20</u> Date
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For Office Use

Zoning District	R15
Front Yard Setback	
Side Yard Setback	
Rear Yard Setback	

Existing Nonconforming Uses or Features	
Other Permits Required	<u>Conditional Use</u> <u>Building</u> <u>Fire Marshal</u> Other
Requires Town Zoning Inspection(s)	<u>Foundation</u> <u>Prior to C. of O.</u>
Zoning Permit Status	<u>Approved</u> <u>Denied</u>
Fee Paid: _____	Date Paid: _____ Staff Initials: _____

Comments	new well for drinking water
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Signature of Town Representative: <u>Shirley Roub</u>	Date Approved/Denied: <u>2/12/2020</u>
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