

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.: 19-11-19-2 Date: 12-11-19 Fee: 50.00
Parcel ID*: 07069016050002 Area Zoned As: Central Business
APPLICANT: PROPERTY OWNER:
Name (Print) AUFN FAIRCIOTH Name CAME
Address 2603 ABATTOLE RD Address 174 N. MCKINLEY ST
City, State COATS, NC City, State COATS, NC
Zip Code 2752/ Zip Code 2752/
Phone # 919-244-4052 Phone #
Location of Property: IN-TOWN YES ETJ ETJ (contiguous)
Present Use of Property: VACANT - RESTAURANT
PROPOSED USE OF PROPERTY:
[] Single Family Dwelling: # Rooms: # Bedrooms: Square Feet: Square Feet (per unit) [] Multi Family Dwelling: # of Units: #Bedrooms (per unit): Square Feet (per unit) [] Mobile Home (single lot): Single wide: Double Wide: [] Mobile Home Park: Section 16, Zoning Ordinance must apply [] Business: Total # of employees per day Type of business [] Others (specify): Replacing Roof - Demo Dragana Roof Roof
Existing structure: Renovate: Addition: Demolish:
WATER AND SEWER SUPPLY:
Water: [] Private [] Public [] Proposed [] Existing Sewer: [] Private [] Public [] Proposed [] Existing
Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the pest of my knowledge. False information is grounds for rejection of the application.
Date: DEC 11, 2019
Notes: Demolishing Outiqueal Roof
Approved: [Denied: [] Coning Administrator: \(\frac{1000}{2000} \) \(\fra
THIS PERMIT IS VALID FOR 12 MONTHS