



# TOWN OF COATS

# ZONING PERMIT APPLICATION

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 permit along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 9-20-19-1 Date: 9/20/19 Fee: \$50

Parcel ID\*: 07069016530008 Area Zoned As: R-6

**APPLICANT:****PROPERTY OWNER:**

Name (Print) James Johnson

Name Same

Address 175 S Denise Ave

Address \_\_\_\_\_

City, State Coats NC

City, State \_\_\_\_\_

Zip Code 27521

Zip Code \_\_\_\_\_

Phone # 919 795 1011

Phone # \_\_\_\_\_

Location of Property: IN-TOWN  ETJ \_\_\_\_\_ ETJ (contiguous) \_\_\_\_\_

Present Use of Property: Residential

**PROPOSED USE OF PROPERTY:**

- Single Family Dwelling: # Rooms: \_\_\_\_\_ # Bedrooms: \_\_\_\_\_ Square Feet: \_\_\_\_\_
- 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): Replace Panel Box

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 best of my knowledge. False information is grounds for rejection of the application.

Signature: [Signature] Date: \_\_\_\_\_

**ZONING ADMINISTRATOR USE ONLY**

Notes: \_\_\_\_\_

Approved: [  ] Denied: [ ]

Zoning Administrator: [Signature] Date: 9/20/19

**APPROVED**  
 TOWN OF COATS ZONING  
 VALID FOR 12 MONTHS

**THIS PERMIT IS VALID FOR 12 MONTHS**