

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.: 2-25-21-1 Date: 2/25/21	Fee: \$50
Parcel ID*: 0706901529 6007 Area Zoned As: R-20	
APPLICANT:	PROPERTY OWNER:
Name (Print) POWEY HOME SOLAY	Name <u>Olga Oppermann</u>
Address 919 NMAIN St	Address 235 Crawford Rd.
City, State MOOVES VILLE, NC	City, State <u>COATS</u> , NC
Zip Code 28115	Cip Code 27521
Phone # 919-300-79710	Phone # 315-489-4205
Location of Property: IN-TOWN ETJ ETJ (contiguous)	
Present Use of Property: Single Family Dwelling	
PROPOSED USE OF PROPERTY:	
Single Family Dwelling: # Rooms: # Bedroom # Bedro	ms (per unit): Square Feet (per unit)
X Existing structure: Renovate: A WATER AND SEWER SUPPLY:	Addition: X Demolish:
Water: [] Private [] Public Sewer: [] Private [] Publi	c [] Proposed []Existing c [] 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:	Date: 02 24 202
Notes: ROOF MOUNTED SOLAR ZONING ADMINISTRATOR USE ONLY APPROVED	
Approved: [🗸]	TOWN OF COATS ZONING VALID FOR 12 MONTHS
Zoning Administrator: Mich Holen Date: 2/25/2021	
THIS PERMIT IS VALID FOR 12 MONTHS	