

Town of Erwin Zoning Application & Permit

Planning & Inspections Department

Rev Sep2014

Each application shoul shape, existing and pro	d be submitted wit	th an attached	plot/site plan with the	proposed use/structur	re showing lot
	posed buildings, p	parking and loa	ding areas, access drive	ves and front, rear, and	d side yard
dimensions.			L Property Owner	<amc.< th=""><th></th></amc.<>	

Each application shoul shape, existing and pro	d be submitted w	ith an attached plo parking and loadi	ng areas, access drive	es and front, rear,	and side yard
shape, existing and pro	posed buildings,	parking and	0		
dimensions. Name of Applicant	Donald B	BARefoot	Property Owner	SAMC	
Home Address	907 Frie	20	Home Address City, State, Zip		
City, State, Zip	DUNN 1	10 1110110			
			Telephone		
Telephone	14 ha se fait	910-489-2221 bberefato127510			
Email	abbeneran	970	AIL . COM	EADIN NC	28339
Address of Proposed	Property	DAA N'	4	ated Project Cost	1
Parcel Identification	Number(s) (PIN)	0597-84	Reconnect	meter bast	Pag
What is the applican	t requesting to bu	ild / what is	RECONNECT	t the	erted over 12 months
the proposed use of	the subject prope	rty? Be specific.	Service OA	La tras	off etc.
Description of any pro	posed improvemer	its Pant iles.	de repris co	wask.	10 () ()
to the building or prot	erty	· A compositiv?	Rental P	preste.	
What was the Previo	ous Use of the sul	ect property:	11.0		
Does the Property A	ccess DOT road?	o property already		perty/Parcel size	.83
Number of dwelling	-	Vatershed Yes	No Wetlands_	Yes No	
Floodplain SFHA		1410101111	sed Septic System	Or	
MUST circle one that	applies to property	Existing/Propos	sed County/City Sew	er	
	West Control				. Athe forgoing
answers, statements, as and belief. The unders application. Upon issu regulations, and the la The undersigning part	nd other information of the stance of this permit was of the State of North authorizes the To	estands that any income to the undersigning party.	arty agrees to conform	itted may result in the to all applicable tow the specifications of	cation and the forgoing pest of their knowledge ne revocation of this n ordinances, zoning plans herein submitted. n to ensure compliance
Don and B	Base Dett	my	h/h	7/	23/21
	JAIL OUT	Signature of Own	ner or Representative	Date	1
Print Name		Digitature of			
For Office Use	0	Existing Nonconfo	rming Uses or Features	3	
Zoning District	PMJ	Other Permits Req	uiredConditiona	al UseBuilding _	Fire Marshal X Other
Front Yard Setback		Requires Town Zo	oning Inspection(s)	Foundation	Prior to C. of O.
		Zoning Permit Sta		edDenied	
Side Yard Setback		Fee Paid:	Date Paid:	Staff Initia	als:
Rear Yard Setback		recruia			
Comments					
Signature of Town	Representative:	In Boul	Da	te Approved/Denied	d: 7/23/2-21
		ection			
Other	(epais	ale com	0+1	ene+ Spi	rules to set

- Contact Humett County Development Services to Set electrical permit 910-893-7525

Application	m	

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Donald B. Base Foot Phone: 910-489-2221
Owner (s) Mailing Address: 907 Fe LEND UY Rol
DUNO, NC 28334
Construction or Site Address: 102A N. 9. In Street, Erwin NC 28339
PIN # Parcel #
Job Cost: Description of Work to be done
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other * For Progress Energy customers we need the premise number
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington: NO electrical work being done reinspection per Duke Power due to vacancy over 1 years
Subdivision:Lot #:
Will provide the labor on this structure. (Contractors Name)
I am the building owner or my NC state license number is, which entitles me to
perform such work on the above structure legally. All work shall comply with the State Building Code and all
other applicable State and local laws, ordinances and regulations.
Contractor's Company Name Telephone
Address Email Address
License #
Structure Owner / Contractor Signature: Daw B Baw for Date: 7/23/21
By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license