

## **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

imensions.	posed bunding	50, P 41			,			•
	Denise	Tol	10201	Prop	erty O	wner	SAMÉ	
Home Address	106 Barnes Drive			Home Address				
City, State, Zip	Erwin NC 28339			City, State, Zip				
Telephone	(410) 203-3475				Telephone			
Email	drijohnson 196 @ gmail.co							
	yru jonnso	1176	y e giraseri.e		7 5			(220
Address of Proposed	Property	709	N 16th S	tree	+, 7	ちゃい	in, NC Z	8339
Parcel Identification l	Number(s) (PIN	1)				Estimat	ed Project Cost	
What is the applicant the proposed use of t	requesting to be he subject prop	mild / erty?	what is Be specific.	nsta	lle	lect	ical me	ter, furn on
Description of any prop to the building or prope	osea improveme	nts		,	V			
What was the Previou		bject 1	property?					
Does the Property Ac				NA				
Number of dwelling/	ne property already			Prop		erty/Parcel size		
Floodplain SFHA	Yes No V	Vaters	hedYes_	No	Wetla	nds	Yes_No	
MUST circle one that a		1	(513.50)				Or	
			sting/Propose er/Applicant N					
nd belief. The undersign pplication. Upon issuar egulations, and the laws he undersigning party a this application as applicat	nce of this permit of the State of N outhorizes the To roved.	, the un orth Ca wn of I	ndersigning pari arolina regulatir	ty agrees ng such this required	s to con work ar uest and	form to a id to the d conduc	all applicable tow specifications of ct a site inspection	n ordinances, zoning plans herein submitted.
or Office Use								
Zoning District	0-6	Existi	ng Nonconform	ing Uses	or Fea	tures	146	
Front Yard Setback		Other Permits RequiredConditional Use _BuildingFire MarshalOther						
	9DC+	Requi	ires Town Zoni				Foundation	Prior to C. of O.
Side Yard Setback	8 64		g Permit Status		_App		Denied	
Rear Yard Setback	25 <u>et</u>	Fee Pa	aid: WMGa	Date	Paid:	A	Staff Initial	s: DME
Comments N 8	xtension	10	mm6	·IC	rota	all el	etrical/	turn on pauls
Signature of Town Repr	esentative:	7,	1.6			Date A	proved Denied:	alguna
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v	Denise	To	Mean	K (	US	tod	ion of	proparty