

### **Application for Plan Review**

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App	Hication # EMEW 103-0005
Date Received: 3-25-10	Received By:
Name of Project:	HAWC: Artisans, Crafters & Vintage Market
Physical Address of Project:	301 W Cornelius Harnett BLKD &
*	Lillington , NC 27546
Plans Submitted By:	Kristen Perry
Project Phone:	(910)-368-1865
Contact Person/Address:	
Contact Email:	Knisten@HameHAWC, org
Contact Phone:	(910)-368-1865
Contractor's Name/Info:	и 
Contractor's Phone:	(

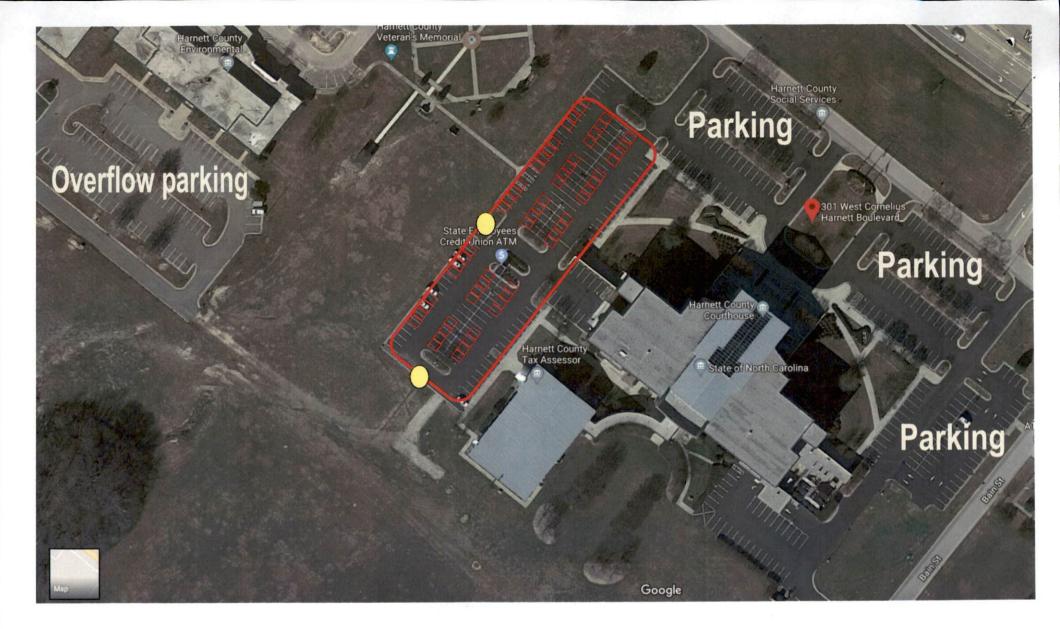
- Plans that are submitted will be reviewed as quickly as possible with an <u>average time of review</u> between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <a href="http://hteweb.harnett.org/Click2GovBP/Index.jsp">http://hteweb.harnett.org/Click2GovBP/Index.jsp</a> or by calling the Harnett County Central Permitting Office (910-893-7525, Option #2), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.



## **Lillington Planning & Inspections Department**

# **ZONING PERMIT**

Permit Number: ZP	-19-11	Project Address:	301 W CORNELL	US HARNETT I	BLV z	oning District: O/S OFFICE SVC
Description of Work:	SPECIAL EV	VENT "ARTISA	ANS, CRAFTERS	AND VINTAGE	MARKE	T" APRIL 6, 2019
Owner / Applicant:	KRISTIN PERI	RY / HAWC		Contractor:	N/A	
(12) months after work this permit is in compl	is started. No work lance with the NC So permit without writt	authorized by any tate Building Code a ten approval of the I	permit that has expired and the Lillington Zonin	shall be performed un ag & Subdivision Ordi nistrator shall constitu	til a new per inance. Any ute sufficient	pended or abandoned for a period of twelve mit has been secured. The issuance of omission, misrepresentation, alteration or grounds for the revocation of this permit.



Tents (10x10) will be setup in area outlined in red and arranged in the following manner:

- $-\ \mbox{groups}$  of four with a minimum of 12 foot separation between groups
- Projected total of 60 tents

Key: Tents groups of four

Portable Toilets (4 total—two at each location)





#### TOWN OF LILLINGTON

# ZONING PERMIT (TEMPORARY USE/SPECIAL EVENTS) APPLICATION

Planning & Inspections Department 106 West Front Street, PO Box 296 Lillington NC 27546 • phone 910-893-0311 •fax 910-893-3693 lillingtonnc.org

TEMPORARY USE/SPECIAL EVENT I	INFORMATION:				
Name of Use/Event: Artisans, Crafters & Vintage Market					
Proposed Location: 301 West Cornelius Harnett Blvd	Roving EventStationary Event				
Date & Time of Set Up & Take Down: Begins	s 4/6/209 10am Ends: 4/6/2019 4pm Rain Date: n/a				
Business Name/Organization: Harnett Animal Welfare Coalition	tion (HAWC)				
Address: PO Box 1324					
City: Lillington	State: NC Zip: 27546				
Contact Person: Kristen Perry	Phone: (910)368-1865 Email: kristen@harnettawc.org				
Event Type: Non-profit × Individual _	Residential Non-Residential				
Is this event open to the public? × Yes	No				
Is the event proposed on public property? ×	YesNo				
Type of Temporary Use/Event:    X   Bazaar/F					
*See Section 3.11.3 for specific requirements for t	these uses.				
Please describe the temporary use/event in detail (attach additional information if necessary):					
Please describe the targeted audience, number of peo	eople expected, etc.:				

FIREWORK INFORMATION:		
<ul> <li>Please attach a copy of firework vendo</li> </ul>	or's certificate of insura	
<ul> <li>Contact Harnett County Fire Marshal'</li> </ul>	s Office (910) 893–758	30 for permit requirements.
ACCOMMODATION INFORMATI	ON:	
ΓENTS:		
Will tents be erected as part of this event: If yes what size(s): Individual Tents 10x10	× Yes	No (IF NO PLEASE PROCEED TO NEXT SECTION)  Expected date to dismantle:
Expected date of tent set up:	0.00	Expected date to dismantle:
<ul> <li>Contact Harnett County Fire Marshal'</li> </ul>	s Office (910) 893–758	30 for permit requirements.
SEATING & TABLES: Seating and tables be used as part of this ever  Please indicate the seating and table	nt: Yes	× No (IF NO PLEASE PROCEED TO NEXT SECTION) attached sketch plan.
FOOD PREPRATION: Will food preparation be part of this event: Please describe how the collection and disposal	× Yes of non-garbage waste	No (IF NO PLEASE PROCEED TO NEXT SECTION) s (cooking greases, drippings, hazardous materials & liquids,
Contact Harnett County Health Depart	tment (910) 893-7550 f	for permit requirements.
MUSEMENT DIDES.		
AMUSEMENT RIDES:  Will food preparation be part of this event:  Please describe if applicable:	Yes	× No (IF NO PLEASE PROCEED TO NEXT SECTION)
<ul> <li>Please indicate the seating and table and</li> <li>Please attached a copy of ride vendor'</li> <li>Contact Harnett County Fire Marshall</li> </ul>	s certificate of insurance	
	× Yes	No (IF NO PLEASE PROCEED TO NEXT SECTION)
Please indicate the seating and table at     Portable toilets are required if Town or		iched sketch plan.  lities are unavailable or inadequate for expected attendance.
OTHER EQUIPMENT:  Any additional equipment brought to the site:  If so please describe:  Applicant should arrange for rental, described to the site:	Yes	× No (IF NO PLEASE PROCEED TO NEXT SECTION)
<ul> <li>Applicant should arrange for rental, de</li> </ul>	elivery, set-up, mainten	nance and pick up other equipment.
ELECTRICITY: s electricity needed as part of this event:	Yes	× No (IF NO PLEASE PROCEED TO NEXT SECTION) h plan.
<ul> <li>Please indicate where access to electricity is ne</li> <li>Applicant should confirm electrical re</li> </ul>	eded on attached sketch quirements & connecti	h plan. ons with sound, stage and food vendors.
TEMPODADV ELECTRIAL CA SERVICI	г.	
TEMPORARY ELECTRIALCA SERVICE Temporary electrical services needed:  Please request temporary electric s  Applicant should confirm electrica	Yes ervices from the Insp	No (IF NO PLEASE PROCEED TO NEXT SECTION) pections Department.
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ELECTRIC GENERATORS:
Will electric generators be used as part of this event: Yes No (IF NO PLEASE PROCEED TO NEXT SECTION)
If so, what is the anticipated load: May be part of food trucks?
Generators must be sized to handle load.
AMOUTE PER COUNTY
AMPLIFIED SOUND:
Will there be amplified sound as part of this event: Yes No (IF NO PLEASE PROCEED TO NEXT SECTION)
If yes, please describe the system to be used:  Sound System Provider Name:
Sound System Provider Name:
MOWING REQUESTED:
If this is a public site, is grass mowing needed:  Yes  No (IF NO PLEASE PROCEED TO NEXT SECTION)
EXTRA TRASH RECEPTICALS:
Are extra trash receptacle needed for this event:   Yes No  If yes, please indicate what is needed for this event:   Roll-out carts Recycle Bins
If yes, please indicate what is needed for this event:  Roll-out carts  Recycle Bins
STREETS/PARKING LOT INFORMATION:
Will a street or parking lot be closed as part of this request:  Yes  No
If yes, what street is requested to be closed: End Closing:
Beginning closing: End Closing:
<ul> <li>Indicate closing on attached sketch plan. Official Board of Commissioner action is required for approval.</li> </ul>
LIABILITY INSURANCE: Liability insurance may be required for some special events or activities to be determined by the Town of Lillington Parks & Recreation Department.  ADDITIONAL SUBMITTAL INFORMATION:
ADDITIONAL SUBMITTAL INFORMATION:
Permit Requirements All applications for a temporary use/special event zoning permit shall provide the following information in addition the information provided in this application:
Per Section 3.11.3 of the Lillington UDO the following Temporary Uses/Special Events have specific requirements:
Produce Sales, Seasonal Outdoor Sales & Other Similar Uses:
<ul> <li>Such temporary uses shall not exceed 90 consecutive days and no more than 2 events per calendar year. Hours of</li> </ul>
operation shall be limited to $7:00 \text{ AM} - 10:00 \text{ PM}$ .
Contractor's Office and Equipment/Storage Sheds:
<ul> <li>Contractor's office and/or equipment/storage sheds may be placed in any district temporarily on the site of</li> </ul>
<ul> <li>construction of a development for which plans have been approved.</li> <li>All such equipment shall be removed upon completion of development.</li> </ul>
<ul> <li>All such equipment shall be removed upon completion of development.</li> <li>Real Estate Office in a Construction Trailer or Temporary Modular Unit:</li> </ul>
<ul> <li>One temporary structure, such as a construction trailer or temporary modular unit may be used as a real estate sales</li> </ul>
office in any new construction project in any district. Such a temporary structure shall be used for the sale of units
within that project only. Temporary real estate offices in construction trailers or temporary modular units may remain on the site until the development
completion date.
<ul> <li>Real Estate Office in a Model Home: A model dwelling may be used as a real estate sales office in a new residential</li> </ul>
development in any District. Such a model home/sales office may be used for the sale of units within that project only.
• Large Events (Bazaars, Festivals, Carnivals, Fars, Circuses, Concerts & Similar Outdoor Gatherings with the total anticipated
assembly of 3,000 or more people and duration of 2 or more days per calendar year on an individual parcel or site). The following information is required as part of the application process a minimum of 30 days prior to the planned event:

Anticipated attendance, including previous attendance figures;
 Anticipated number of days needed to prepare location for use;
 Means of activity containment (i.e. fencing, security, etc.);
 Event security, crowd control and traffic safety measures. Provisions for these must be approved by the Lillington

Police Department;