



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

Permit No.: ~~0706~~ 3-12-19-1 Date: 3/6/19 Fee: \$50.00

Parcel ID #: #3 07069015010014 06 Area Zoned As: RA

**APPLICANT:**

**PROPERTY OWNER:**

Name (Print) Theresa Wilkins  
Address 500 NC 55 W  
City, State Coats NC  
Zip Code 27521  
Phone # 919-754-7057

Name Joseph W + Theresa Wilkins  
Address 14B Anna Street  
City, State Lillington NC  
Zip Code 27546  
Phone # 919-754-7057

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

Present Use of Property: Farm

**PROPOSED USE OF PROPERTY:**

Single Family Dwelling: # Rooms: \_\_\_\_\_ # Bedrooms: 2 Square Feet: 1700  
 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): Back Garage

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: Theresa Wilkins Date: 3/6/19

**ZONING ADMINISTRATOR USE ONLY**

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

Approved:  Denied:

Zoning Administrator: Nick Holcomb Date: 3/12/19

**THIS PERMIT IS VALID FOR 12 MONTHS**