



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #
25-0033

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 dimensions.

Name of Applicant	GREGORY GLATZ	Property Owner	" " SAME
Home Address	408 W-H STREET	Home Address	
City, State, Zip	ERWIN NC. 28	City, State, Zip	
Telephone	919-475-5661	Telephone	
Email	GLATZhaus@gmail	Email	

Address of Proposed Property			
Parcel Identification Number(s) (PIN)		Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.			
Description of any proposed improvements to the building or property		Replace Gas Puck - Existing Gas Line	
What was the Previous Use of the subject property?			
Does the Property Access DOT road?			
Number of dwelling/structures on the property already		Property/Parcel size	
Floodplain SFHA <u>Yes</u> <u>No</u>	Watershed <u>Yes</u> <u>No</u>	Wetlands <u>Yes</u> <u>No</u>	
<u>MUST</u> circle one that applies to property		Existing/Proposed Septic System <u>Or</u> Existing/Proposed County/City Sewer	

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Print Name	Gregory Glatz	Signature of Owner or Representative	9/18/24	Date
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For Office Use

Zoning District	RHMV	Existing Nonconforming Uses or Features	NO
Front Yard Setback	15 FT	Other Permits Required	<u>Conditional Use</u> <input checked="" type="checkbox"/> Building <u>Fire Marshal</u> <u>Other</u>
Side Yard Setback	8 FT	Requires Town Zoning Inspection(s)	<u>Foundation</u> <u>Prior to C. of O.</u>
Rear Yard Setback	15 FT	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <u>Denied</u>
Fee Paid: PAID		Date Paid: -	Staff Initials: DMF

Comments	REPLACE UTILITY
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Signature of Town Representative:	[Signature]	Date Approved/Denied:	9/18/24
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