



Town of Erwin
Zoning Application & Permit
Planning & Inspections Department

Permit #
25-0179

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	MICHAEL DODSON	Property Owner	JOHN & REBECCA MCGOVERN
Home Address	54 BRIARWOOD LN	Home Address	205 CHICORA CLUB DR
City, State, Zip	SMITHFIELD, NC, 27577	City, State, Zip	DUNN, NC, 28334
Telephone	919-333-5686	Telephone	919-412-3354
Email	MIKE@PRODIGYMECHANICAL.COM	Email	RJMCGOVERN22@GMAIL.COM

Address of Proposed Property		205 Chicora Club Dr.	
Parcel Identification Number(s) (PIN)		Estimated Project Cost	\$8500
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.		Replacing down stairs AC	
Description of any proposed improvements to the building or property		Replacing downstairs AC	
What was the Previous Use of the subject property?			
Does the Property Access DOT road?			
Number of dwelling/structures on the property already	1	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>	
MUST 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.

<u>MICHAEL DODSON</u>	<u><i>Michael Dodson</i></u>	<u>06/27/2025</u>
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	R15	Existing Nonconforming Uses or Features	NA
Front Yard Setback	35 ft	Other Permits Required	<u>Conditional Use</u> <u>Building</u> <u>Fire Marshal</u> <u>Other</u>
Side Yard Setback	10 ft	Requires Town Zoning Inspection(s)	<u>Foundation</u> <u>Prior to C. of O.</u>
Rear Yard Setback	35 ft	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <u>Denied</u>
		Fee Paid: WAIVED	Date Paid: NA Staff Initials: OME

Comments	Trades from Harnett County Central Permitting
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Signature of Town Representative: <u><i>[Signature]</i></u>	Date Approved/Denied: 6/30/25
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