



Initial Application Date: 12/3/18

Application # SFD1812-0001

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Wimberly Investments, LLC Mailing Address: 2563 Oak Grove ch Rd
City: Angier State: NC Zip: 27501 Contact No: 919-669-7066 Email: trawimberly@gmail.com

APPLICANT: Tony Wimberly Mailing Address: 2563 Oak Grove ch Rd
City: Angier State: NC Zip: 27501 Contact No: 919-669-7066 Email: trawimberly@gmail.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Tony Wimberly Phone # 919-669-7066
ADDRESS: lot 6, Turner Trace Ln, Coats PIN: 0690-60-6407-000
DEED OR OTP: 31043/917

PROPOSED USE:

- SFD: (Size 30 x 50) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Monolithic Slab:
(Is the bonus room finished? yes no w/ a closet? yes no (if yes add in with # bedrooms)
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
(Is the second floor finished? yes no Any other site built additions? yes no
- Manufactured Home: SW DW TW (Size _____ x _____) # Bedrooms: _____ Garage: site built? Deck: site built?
- Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? yes no

Water Supply: Town water County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? yes no
Does the property contain any easements whether underground or overhead yes no Public Utilities
Structures (existing or proposed): Single family dwellings: proposed Manufactured Homes: _____ Other (specify): _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Tony Wimberly
Signature of Owner or Owner's Agent Date 12-3-2018

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.
*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

strong roots • new growth

strong roots • new growth



TOWN OF COATS

ZONING PERMIT APPLICATION

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.: 12-3-18-1 Date: 12/3/18 Fee: \$50

Parcel ID*: 07069015280008 05 Area Zoned As: R20

APPLICANT:

PROPERTY OWNER:

Name (Print) Tony Wimberly

Name Wimberly Investments, LLC

Address 2563 Oak Grove Ch Rd

Address 2563 Oak Grove Ch Dr

City, State Angier NC 27501

City, State Angier NC

Zip Code 27501

Zip Code 27501

Phone # 919-669-7066

Phone # 919-669-7066

Location of Property: **IN-TOWN** **ETJ** **ETJ (contiguous)**

Present Use of Property: lot

PROPOSED USE OF PROPERTY:

- Single Family Dwelling: # Rooms: _____ # Bedrooms: _____ Square Feet: _____
- 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): _____

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: [Signature]

Date: 12-3-2018

APPROVED

ZONING ADMINISTRATOR USE ONLY

Notes: _____

TOWN OF COATS ZONING
VALID FOR 12 MONTHS

Approved: Denied:

Zoning Administrator: Nick Holcomb Date: 12-3-18

THIS PERMIT IS VALID FOR 12 MONTHS