



Zoning Application & Permit

Planning & Inspections Department

Permit #

Rev Sep 2014

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 | Doyle P. Allen | Property Owner | Doyle P. Allen |
| Home Address | 102 Old Cut OFF RD | Home Address | 64 Kitty Lane |
| City, State, Zip | 28334 | City, State, Zip | 28334 |
| Telephone | 910-658-4696 | Telephone | 658-4696 |
| Email | | Email | |

Address of Proposed Property: 64 Kitty Lane

Parcel Identification Number(s) (PIN): 0596-39-7209.00

Estimated Project Cost: \$70,006

What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.
New ~~SFD~~ SFD with single family dwelling

Description of any proposed improvements to the building or property

What was the Previous Use of the subject property? Pkg House

Does the Property Access DOT road? YES

Number of dwelling/structures on the property already: 1

Property/Parcel size: .95

Floodplain SFHA Yes No Watershed Yes No Wetlands Yes No

MUST circle one that applies to property
Existing/Proposed Septic System Or Existing/Proposed County/City Sewer

PAID

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the foregoing 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: Doyle P. Allen

Signature of Owner or Representative: Doyle P. Allen

Date: 10-25-19

For Office Use

| | | | |
|--------------------|-----------------------|-----------------------------------------|------------------------------------------------------------------------------|
| Zoning District | R10 | Existing Nonconforming Uses or Features | |
| Front Yard Setback | 35' | Other Permits Required | Conditional Use Building Fire Marshal Other |
| Side Yard Setback | 10' | Requires Town Zoning Inspection(s) | Foundation <input checked="" type="checkbox"/> Prior to C. of O. |
| Rear Yard Setback | 35' | Zoning Permit Status | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied |
| Comments | New permits for a SFD | | |

Signature of Town Representative: Snow Book

Date Approved/Denied: 10/25/19

Has bathroom kitchen, living room an office was a 12x12 room added on to it property is being subdivided and will be on its own lot

any questions call Snow Book 910-591-4200

OCT 25 2019
TOWN OF ERWIN
P. Allen