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. Also, in order to receive a Privilege License from the Town of Coats to open a business, you must have a valid Zoning Permit, along with all applicable inspections from Harnett County.

| Permit No.: 11-4-20-1 Date: 11/5/2020 Fee: \$50 |
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| Parcel ID*: 070599 0152 07 Area Zoned As: RA Registential Agriculture |
| APPLICANT: PROPERTY OWNER: |
| Name (Print) Craig Matthews Realty Inc. Name Denise C. Matthews |
| Address PoBox 399 Address 496 Harvell Rd |
| City, State Coats NC City, State Coats NC |
| Zip Code 27521 Zip Code 2752/ |
| Phone # 910-890-4330 Phone # 919-669-2572 |
| Location of Property: IN-TOWN ETJ ETJ (contiguous) |
| Present Use of Property: Vacant lot |
| PROPOSED USE OF PROPERTY: |
| [] Single Family Dwelling: # Rooms: 3 # Bedrooms: Square Feet: 1358 [] 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: Date: |
| best of my knowledge. False information is grounds for rejection of the application. Signature: Date: 11-26-20 |
| best of my knowledge. False information is grounds for rejection of the application. Signature: Date: //-Z6-20 ZONING ADMINISTRATOR USE ONLY Notes: Denied: [] |
| Signature: Date: |