



Initial Application Date: 11/9/2021

Application # _____

CU# _____

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: Seven Magnolias Construction, Inc Mailing Address: 14288 NC 210
City: Angier State: NC Zip: 27501 Contact No: 919-868-9385 Email: SNORDAN@7magnolias.com

APPLICANT*: SAME Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

ADDRESS: 202 West N Street - Erwin PIN: 0597-57-9048.000

Zoning: R Flood: Min Watershed: _____ Deed Book / Page: 4068/682

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

SFD: (Size 55 x 30) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: Monolithic Slab: _____
TOTAL HTD SQ FT 1340 **GARAGE SQ FT** _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
TOTAL HTD SQ FT _____ (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: _____ **TOTAL HTD SQ FT** _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? () yes () no
TOTAL HTD SQ FT _____ **GARAGE** _____

Water Supply: 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

Structures (existing or proposed): Single family dwellings: _____ 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.

[Signature]
Signature of Owner or Owner's Agent

11/9/2021
Date

*****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



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

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|----------|
| Permit # |
| |

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 | SEVEN MAGNOLIAS CONSTRUCTION | Property Owner | SEVEN MAGNOLIAS CONSTRUCTION |
| Home Address | 14288 NC 210 | Home Address | 14288 NC 210 |
| City, State, Zip | ANGIER, NC 27501 | City, State, Zip | ANGIER NC 27501 |
| Telephone | 919-868-9385 | Telephone | 919-868-9385 |
| Email | SNORDAN@7MAGNOLIAS.COM | Email | SNORDAN@7MAGNOLIAS |

| | | | |
|--|--|---|-----------|
| Address of Proposed Property | 202 West N STREET ERWIN | | |
| Parcel Identification Number(s) (PIN) | 0597-57-9048.000 | Estimated Project Cost | \$175,000 |
| What is the applicant requesting to build / what is the proposed use of the subject property? Be specific. | RESIDENTIAL HOME | | |
| Description of any proposed improvements to the building or property | NEW CONSTRUCTION | | |
| What was the Previous Use of the subject property? | Lot | | |
| Does the Property Access DOT road? | NO | | |
| Number of dwelling/structures on the property already | 0 | Property/Parcel size | .24 |
| Floodplain SFHA <u>Yes</u> <input checked="" type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/> | Watershed <u>Yes</u> <input checked="" type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/> | Wetlands <u>Yes</u> <input checked="" type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/> | |
| 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.

| | | |
|--------------|--------------------------------------|-------------------------|
| STEVE NORDAN | <i>Steve Nordan</i> | NOV 12 2021 11/11/21 |
| Print Name | Signature of Owner or Representative | Date |

For Office Use

| | | | |
|--------------------|---------------------|---|---|
| Zoning District | R6 | Existing Nonconforming Uses or Features | |
| Front Yard Setback | 25' | Other Permits Required | <input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input type="checkbox"/> Other |
| Side Yard Setback | 8' | Requires Town Zoning Inspection(s) | <input checked="" type="checkbox"/> Foundation <input checked="" type="checkbox"/> Prior to C. of O. |
| Rear Yard Setback | 25' | Zoning Permit Status | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied |
| Comments | New stick Built SFD | | |
| Fee Paid: | 100 | Date Paid: | 11/12/21 |
| | | Staff Initials: | M 70 |

| | | | |
|-----------------------------------|---------------------|-----------------------|------------|
| Signature of Town Representative: | <i>Steve Nordan</i> | Date Approved/Denied: | 11/12/2021 |
|-----------------------------------|---------------------|-----------------------|------------|

Contact Harnett County Development services to set permits
 910-897-7525
 -Harnett Regional water for water and sewer