



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. 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.: 9-16-24-2 Date: 9-12-24 Fee: \$50

Parcel ID*: 070690 9003 Area Zoned As: MU 2

APPLICANT:

PROPERTY OWNER:

Name (Print) Craig Matthews Realty Inc.
 Address PO Box 399 156 S. McKinley St.
 City, State Coats, N.C.
 Zip Code 27521
 Phone # 910-890-4330

Name Craig T. Matthews and Denise C. Matthews
 Address 496 Harvell Rd.
 City, State Coats, N.C.
 Zip Code 27521
 Phone # 910-890-4330 919-669-2592

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

Present Use of Property: Vacant lot Property address is 243 S. McKinley St Coats NC 27521

PROPOSED USE OF PROPERTY:

Single Family Dwelling: # Rooms: 4 # Bedrooms: 1 Square Feet: 672
 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: Craig Matthews Date: 9-12-24

ZONING ADMINISTRATOR USE ONLY

Notes: _____
 Approved: [] Denied: []
 Zoning Administrator: Mark [Signature] Date: 9-16-24
 TOWN OF COATS ZONING VALID FOR 12 MONTHS