

Initial Application Date: 11.13.19

Application # BOA1911.0010
DRB _____ CU BOA1910.0002

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Ronnie L. Wilson Mailing Address: 416 Shue Road

City: BROADWAY State: NC Zip: 27505 Home #: N/A Contact #: 919-499-7116

APPLICANT*: Ronnie L. Wilson Mailing Address: 416 Shue Rd

City: BROADWAY State: NC Zip: 27505 Office #: N/A Contact #: 919-499-7116

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Same as Above Phone #: All Above

PROPERTY LOCATION: Subdivision: Ronald WJSM Lot #: 2 Lot Size: 10.01 AC

State Road #: 1271 State Road Name: Shue Road Map Book&Page: 2008 / 565

Parcel: 13.9692.0007 PIN: 9692-62-1032.000 2626 / 0676

Zoning: R430 Flood Zone: _____ Watershed: _____ Deed Book&Page: 2626 / 0676 Power Company*: Central Elect.

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

421 North to Holly Springs Church Rd. TURN Right go to Hollies Pines Road
TURN left GO TO Shue Rd TURN left 3rd House on Right

PROPOSED USE:

- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Business Sq. Ft. Retail Space _____ Type _____ # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers _____ # Afterschoolers _____ # Employees _____ Hours of Operation _____
- Industry Sq. Ft. _____ Type _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity _____ # Bathrooms _____ Kitchen _____
- Accessory/Additional (Size _____ x _____) Use TURKEY SHOOT

Water Supply: (County () Well (No. dwellings _____) **MUST** have operable water before final

Sewage Supply: () New Septic Tank (Complete Checklist) (Existing Septic Tank (Complete Checklist) () County Sewer

Comments: _____

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.

Ronnie L. Wilson
Signature of Owner or Owner's Agent

11-13-19
Date

****This application expires 6 months from the initial date if no permits have been issued****

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY