

Initial Application	n Date: Application #
	DRB#CU#
	COMMERCIAL COUNTY OF HARNETT LAND USE APPLICATION
Central Permitting (F	(Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt #2 Fax: (910) 893-2793 www.hametLorg/permits
LANDOWNER:_	
City: Silver	State: MD Zip: 20905 Contact # 919 475 6110 Email: property. reseahmediyya
APPLICANT*:	Mailing Address:
City:	State:Zip: Contact # Email:
*Please fill out applie	olicant information if different than landowner
CONTACT NAME	IE APPLYING IN OFFICE: Phone #
Address:	PIN:
Zoning: RA-30	Watershed: N/A Flood: N/A Deed Book Page: 4270/2717.
Setbacks - Fi	Front: 35' Back: 25' Side: 10' Corner: 20'
PROPOSED USE	
u Multi-Family	y Dwelling No. Units: No. Bedrooms/Unit:
□ Business	Sq. Ft. Retail Space: # Employees: Hours of Operation:
□ Daycare	# Preschoolers: # Afterschoolers: # Employees: Hours of Operation:
□ Industry	Sq. Ft: Hours of Operation:
<i></i>	200
Church	Seating Capacity: 300 #Bathrooms: 4 Kitchen: 1
☐ Accessory/A	Addition/Other (Sizex) Use:
Water Supply:	County Existing Well New Well (# of dwellings using well) *Must have operable water before final
Sewage Supply:	New Septic Tank Expansion Relocation
	Complete Environmental Health Checklist on other side of application if Septic
Comments:	
If normits are gran	nted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitte
	t foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.
*	
	JAH 4-8-2025
	Signature of Owner's Agent ` Date

This application expires 6 months from the initial date if permits have not been issued

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

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.



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OR AUTH	FORMATION I	h Department Appl IN THIS APPLICATION IS O CONSTRUCT SHALL E	S FALSIFIED, CHANGED, O SECOME INVALID. The per	R THE SITE IS ALTERED, mit is valid for either 60 mon	uthorization to Construct THEN THE IMPROVEMENT PERMIT ths or without expiration depending upon	
documenta	tion submitted.	(Complete site plan = 60 m	onths; Complete plat = withou	t expiration		
• A	e clearly flag lace "orange uildings, swin lace orange f property is valuation to be	ged approximately ever house corner flags" a mming pools, etc. Place Environmental Health thickly wooded, Envir be performed. Inspect	ry 50 feet between corner of the process flags per site plan developmental Health require ors should be able to wall business days after of the property of the process of	posed structure. Also to eloped at/for Central Persily viewed from road to es that you clean out to k freely around site. Do onfirmation. \$25.00 re	assist in locating property. the undergrowth to allow the soil not grade property. turn trip fee may be incurred for	
<u>f</u>	ailure to unc	over outlet lid, mark	house corners and pro	perty lines, etc. once le	ot confirmed ready.	
• F • P a • D	repare for in nd then put I	spection by removing a lid back in place. (Unle LIDS OFF OF SEPTIC	flags and card on proper soil over outlet end of taless inspection is for a se TANK TION MAY BE REQUIR	nk as diagram indicates ptic tank in a mobile hor	NY INSPECTION"	
If applying	g for authorizat	ion to construct please ind	icate desired system type(s):	can be ranked in order of p	reference, must choose one.	
{}} Accepted		{}} Innovative	(X) Conventional	{}} Any		
{ } Alte	ernative	{ } Other _				
The application.	ant shall notify	the local health departn s "yes", applicant MUST	nent upon submittal of this a	pplication if any of the fo	llowing apply to the property in See Platt Info attach	
{_}}YES	NO {X}	Does the site contain a	ny Jurisdictional Wetlands?			
{_}}YES	(X) NO	Do you plan to have ar	irrigation system now or i	the future?		
{_}}YES	ON (VO	Does or will the building contain any drains? Please explain.				
YES	{ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{_}}YES	(DY NO	Is any wastewater going to be generated on the site other than domestic sewage?				
{_}}YES	NO	Is the site subject to approval by any other Public Agency?				
(X) YES	{ \ \ NO	Are there any Easemen	ts or Right of Ways on this			

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

If yes please call. No Cuts at 800-632-4949 to locate the lines. This is a free service.

Does the site contain any existing water, cable, phone or underground electric lines?

(X) YES

{ _ } NO

