

Initial Application Date: _____

Application # _____

DRB # _____ CU # _____

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: Campbell University Mailing Address: PO Box 114

City: Buies Creek State: NC Zip: 27506 Contact # 910-893-1610 Email: _____

APPLICANT*: Southeastern Construction of Buies Creek Mailing Address: 423 Main Street

City: Buies Creek State: NC Zip: 27506 Contact # 919-282-2443 Email: michael@si-nc.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Michael Weaver Phone # 919-282-2443

PROPERTY LOCATION: Subdivision: _____ Lot #: _____ Lot Size: 27.14

State Road # _____ State Road Name: _____ Map Book&Page: _____ / _____

Parcel: _____ PIN: 0670-74-7082.000

Zoning: _____ Flood Zone: _____ Watershed: _____ Deed Book&Page: 561 / 0009 Power Company*: _____

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 421 to Campbell University. Take Main Street and turn left onto Burt Street, then left onto Day Dorm Rd. Park in parking lot adjacent to baskett ball courts and enter building from Side. This is Building / Parcel #217 on GIS.

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/Addition/Other (Size x) Use: Frame up 4 offices in existing open area

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *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.

Michael Weaver

Signature of Owner or Owner's Agent

4/14/26

Date

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

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