



Initial Application Date: 3.6.19

Application # BRES1903.0008

CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  
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: Clayton J. Doane Mailing Address: 342 Bj Palmer Dr  
City: Spring Lake State: NC Zip: 28390 Contact No: 910-723-1244 Email: claydoane@icloud.com

APPLICANT\*: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner  
ADDRESS: 342 Bj Palmer PIN: 0514.47.1031  
Zoning: R420M Flood: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book / Page: 2250.0035  
Setbacks - Front: \_\_\_\_\_ Back: 5 Side: 20 Corner: 20 Overhills Creek  
2160# Metal  
lot 105

**PROPOSED USE:**

- SFD: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ # Baths: \_\_\_\_\_ Basement(w/wo bath): \_\_\_\_\_ Garage: \_\_\_\_\_ Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ Slab: \_\_\_\_\_  
(Is the bonus room finished? ( ) yes ( ) no w/ a closet? ( ) yes ( ) no (if yes add in with # bedrooms)
- Mod: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Basement (w/wo bath) \_\_\_\_\_ Garage: \_\_\_\_\_ Site Built Deck: \_\_\_\_\_ On Frame \_\_\_\_\_ Off Frame \_\_\_\_\_  
(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: \_\_\_\_\_
- Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: \_\_\_\_\_
- Addition/Accessory/Other: (Size 12 x 18) Use: Metal Storage shed Closets in addition? ( ) yes (  ) no

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: House only Manufactured Homes: \_\_\_\_\_ Other (specify): Storage Bld.

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 of Owner or Owner's Agent

2/28/2019  
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



▼ DOANE CLAYTON J--342 [X] [Q]

Show search results for DOAN...



**SITE PLAN APPROVAL** *discontinued*  
**DISTRICT** RA20M **USE** storage shed  
**#BEDROOMS** 3.6.19 dyouism  
**ZONING ADMINISTRATOR**



0 10 20ft

-78.953 35.253 Degrees

Print this page



Property Description:

LT#165 OVERHLS CRK S5 PT3MAP#2005-849

Harnett County GIS

PID: 01050401 0002 15

PIN: 0514-47-1031.000

REID: 0062723

Subdivision:

Taxable Acreage: 1.000 LT ac

Caclulated Acreage: 0.32 ac

Account Number: 1400026956

Owners: DOANE CLAYTON J

Owner Address : 342 BJ PALMER DRIVE SPRING LAKE, NC 28390-0000

Property Address: 342 B J PALMER DR SPRING LAKE, NC 28390

City, State, Zip: SPRING LAKE, NC, 28390

Building Count: 1

Township Code: 01

Fire Tax District: Anderson Creek

Parcel Building Value: \$143980

Parcel Outbuilding Value : \$0

Parcel Land Value : \$30000

Parcel Special Land Value : \$0

Total Value : \$173980

Parcel Deferred Value : \$0

Total Assessed Value : \$173980

Neighborhood: 00139

Actual Year Built: 2006

TotalAcutalAreaHeated: 1982 Sq/Ft

Sale Month and Year: 7 / 2006

Sale Price: \$171500

Deed Book & Page: 2250-0055

Deed Date: 2006/07/05

Plat Book & Page: 2005-849

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Y

Transfer or Split: T

Within 1mi of Agriculture District: No

Prior Building Value: \$164340

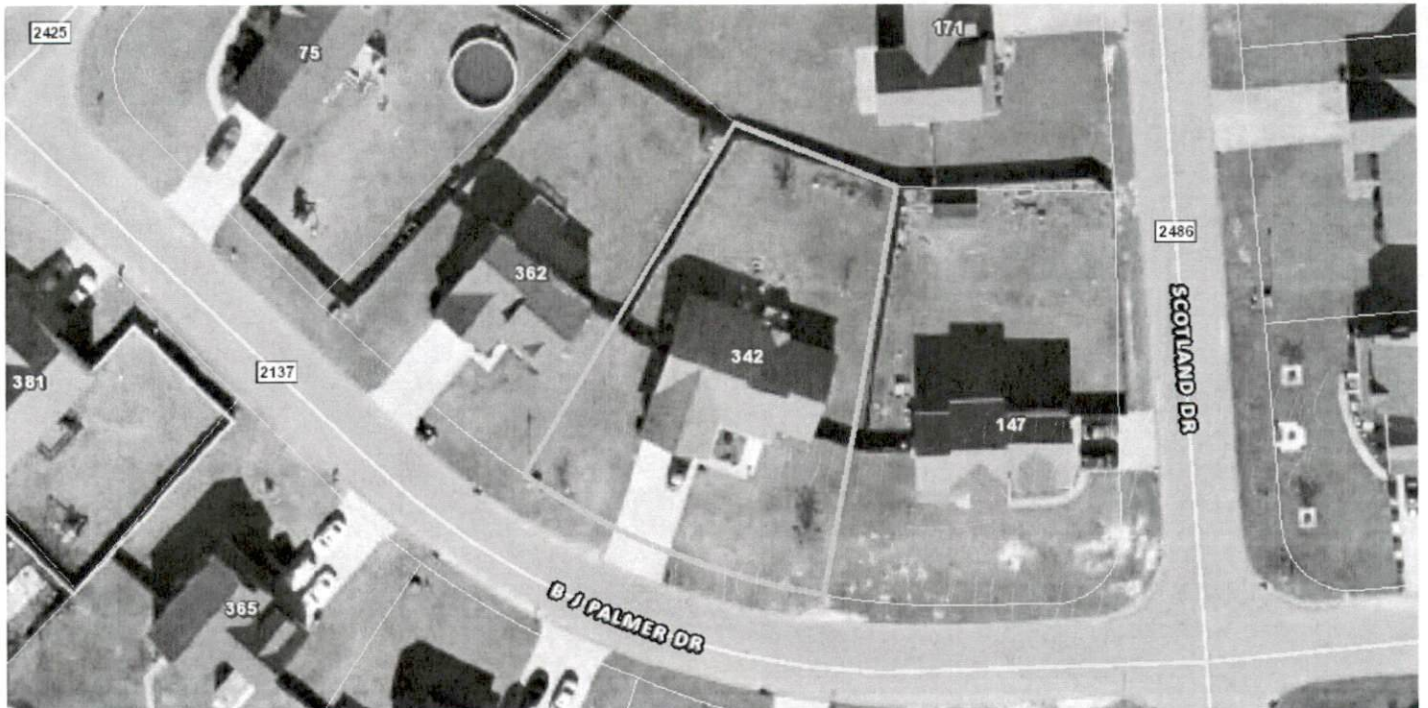
Prior Outbuilding Value : \$0

Prior Land Value : \$22000

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$186340





Application # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Clayton J. Doane Date: 2/28/2019  
Site Address: 342 Bj Palmer dr. Phone: 910-723-1244  
Subdivision: Overhills Creek Lot: 165  
Description of Proposed Work: Metal storage building

**General Contractor Information**

Carolina Car Ports (800) 670-4262  
Building Contractor's Company Name Telephone  
187 Cardinal Ridge Trail, Dobson, NC 27017 mickey.e@carolinacarports.com  
Address Email Address  
65533  
License #

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size: \_\_\_\_\_ Amps T-Pole:  Yes  No  
Electrical Contractor's Company Name Telephone  
Address Email Address  
License #

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_  
Mechanical Contractor's Company Name Telephone  
Address Email Address  
License #

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name Telephone  
Address Email Address  
License #

**Insulation Contractor Information**

Insulation Contractor's Company Name & Address Telephone

**\*NOTE: General Contractor / owner must fill out and sign the second page of this application.**



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

**EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.**

  
Signature of Owner/Contractor/Officer(s) of Corporation

2/28/2019  
Date

**Affidavit for Worker's Compensation N.C.G.S. 87-14**

The undersigned applicant being the:

General Contractor     Owner     Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
- Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.
- Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.
- Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: 

Date: 2/28/2019