

Initial Application Date: 7 -11-10

Application #	BRES	1901	-000

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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: Halina Llubers Mailing Address:
City: State: Zip: Contact No: Email:
APPLICANT: Heling Address:
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
ADDRESS: 395 Wyntham Pl. PIN: 0664-97-9415.000
Zoning RA 30 Flood: Watershed S-\ UDeed Book / Page:
Setbacks - Front: Back: Side: Corner:
PROPOSED USE:
Monolithic SFD: (Sizex) # 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: (Sizex) # 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 (Sizex) # Bedrooms: Garage:(site built?) Deck: _(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
☐ Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees: Use: Deck extension Closets in addition? (_) yes (_) no ONY ZZXIZ will be
Water Supply:CountyExisting WellNew 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: Manufactured Homes: Other (specify):
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 submitte 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 of Owner's Agent Date
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