Initial Application Date: 131 2070

COUNTY OF HARNETT DEMOLITION APPLICATION  Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER: DAVID LAWB Mailing Address: PC Box 5053 DANKSMOOTHE
City: SANTURU State: N Zip: 27331 Contact # 9197709338 Email: Jambe Cisco. com
APPLICANT*: DAVID LAMB Mailing Address: SAME
City: State: Zip: Contact # Email: *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: SAWE AS ABOVE Phone #
PROPERTY LOCATION: Subdivision: PCCLES MHP Lot #: 105 Lot Size:
State Road # 24/27
Parcel: 105 EUNICE LN PIN:
Zoning: Flood Zone: Watershed: Deed Book&Page: /
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 24/27 Packes MHP to
EUNICE LN.
Structure(s) to be demolished & removed: Single family dwelling Manufactured Home Other (specify)
Structures (existing and/or proposed): Single family dwellings Manufactured Homes Other (specify)
/
Water Supply: (_) County (_) Existing Well
Sewage Supply: ( Existing Septic Tank ( ) County Sewer
* If a new structure is to be replaced on this lot, please ensure that existing septic system is not damaged.
* If an existing well is on site and is to be discontinued, please contact Harnett County Environmental Health for assistance.
*Upon the issuance of the Certificate of Compliance, the Harnett County Tax Department shall be notified of the removal to
ensure proper listing.
*The demolition contractor is responsible for submitting verification of proper disposal prior to the Final inspection.
**PLEASE NOTE**Failure to completely demolish, remove, and clear the premises will result in the withholding of the Certificate
of Compliance. Thus, future permits for the property will be denied, and fines may be imposed for failure to complete demolition/
removal.
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.
Cliff MM 1-31-7026
Signature of Owner's Agent

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