Initial A	Application Date:				Application #	
			COUNTY OF HARNE	ETT RESIDENTIAL LAND US	CU#	1 - 1 - 1 - 1 - 1 - 1
С	entral Permitting	108 E. Front Stre			ext:2 Fax: (910) 893-2793	www.harnett.org/permits
	A RECORDED S	SURVEY MAP, RECORD	ED DEED (OR OFFER TO	PURCHASE) & SITE PLAN ARE F	REQUIRED WHEN SUBMITTING A	LAND USE APPLICATION
LAND	OWNER: EJ WON	ACK ENTERPRIS	SES INC	Mailing Address: 1947	7 S HORNER BLVD	
City: S	SANFORD	St	ate: NC Zip: 27330	Contact No: 919-775-36	600 Email:	
ADDLI	JAMES C	ARTER	Mailian	101 RYES LANE		
City: L	ILLINGTON	C	NC 27546	919-498-48	306 Email:	160
*Please	fill out applicant infor	mation if different than	landowner	Contact No:	Email:	-/19 S - 12 10 1
CONT	ACT NAME APPL	YING IN OFFICE:	JWOMACK		Phone #_919-777-431	79
			1000	n+ Tree (2+ Lot#:	Lot Size:
State F	Road #	State Road	Name:		Map Book &	Page:/
Parcel				PIN:		
Zoning	j:Flood	Zone: Wat	tershed: De	ed Book & Page:/	Power Company*: _	
*New s	structures with Prog	gress Energy as serv	vice provider need to s	upply premise number	fr	om Progress Energy
	POSED USE:					Monolithic
u s	FD: (Sizex_				e: Deck: Crawl Space	e: Slab: Slab:
		(is the bonus ro	oom finished? () yes	s () no_w/ a closet? () y	yes () no (if yes add in with	# bedrooms)
□ м	od: (Sizex_				e: Site Built Deck: Cuilt additions? () yes () no	
	,					
1 M	anufactured Home	:swbw	TW (Sizex_	44) # Bedrooms: 3 Ga	arage:(site built?) Dec	k:(site built?)
□ D	uplex: (Size	x) No. Building	gs:N	No. Bedrooms Per Unit:	<u> </u>	
О Н	ome Occupation: #	Rooms:	Use:	Hours of Opera	ation:	#Employees:
□ Ad	ddition/Accessory/C	Other: (Sizex_) Use:		Closets in	n addition? () yes () no
Water s	Supply: Cou	unty Existing	Well New We	ell (# of dwellings using well) *Must have operal	ple water before final
					mplete Checklist) Cour	
					feet (500') of tract listed above	
				overhead () yes () no		, (
				Manufactured Home	100000	posify):
				managed of Home	S. (I) Other (S)	Jecny)
Requir		operty Line Setba	cks: Comm	nents:		
Front	Minimum	Actual_80				
Rear						
Closest	t Side	25				
Sidestr	eet/corner lot					
	st Building					
on sam		Land Use Applicatio	n	Page 1 of 2		03/11

Initial Application Date:_

03/11

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE 421 TOWARD SANFORD TURN LEFT ON OLD US 421
GO APPROX 7 MILES SUBDIVISION TO THE RIGHT, TURN RIGHT ON WAYNE MCLEAN DRIVE TURN RIGHT ON BENT TREE C'
SECOND LOT TO THE LEFT
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 & Agent Date

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

^{***}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.***