

Initial Application Date: 10/15/2020

Application # _____

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: ASHLEY PING & DAVID LONGMAN Mailing Address: 91 SANDALWOOD DR.
City: SPRING LAKE State: NC Zip: 28390 Contact No: (919) 897-6403 Email: ashbee199490@gmail.com

APPLICANT*: CLAYTON HOMES Mailing Address: 3340 GILLESPIE ST.
City: FAYETTEVILLE State: NC Zip: 28306 Contact No: (910) 424-8600 Email: HC196@claytonhomes.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: ELIZABETH ROCKWELL Phone # (910) 424-8600

PROPERTY LOCATION: Subdivision: 16962 NC-27 W. SANFORD 27332 Lot #: 1 Lot Size: .80 ACRE
State Road # 27 WEST State Road Name: _____ Map Book & Page: 2007/ 455
Parcel: 030507 0132 PIN: 9576-69-4322.000
Zoning: RA-20R Flood Zone: MIN. Watershed: NO Deed Book & Page: 3793 10605 Power Company*: CENTRAL ELECTRIC

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

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 28 x 68) # Bedrooms: 4 Garage: NO (site built? ____) Deck: NO (site built? ____)
- Duplex: (Size ____ x ____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size ____ x ____) Use: _____ Closets in addition? () yes () no

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

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: 1 Other (specify): 2 CARPET and CINDERBLOCK OUTBUILDING

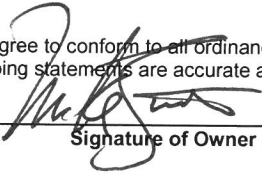
Required Residential Property Line Setbacks:

Comments: _____

Front	Minimum _____	Actual _____
Rear	_____	_____
Closest Side	_____	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 16.2 MILES ON NC-27 W.
FROM LILLINGTON, PROPERTY WILL BE ON RIGHT.

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

10/15/2020
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****