

Initial Application Date:

Application Date: 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: Samuel Howard Stephenson Mailing Address: 8196 Panther Lake Road
City: Willow Springs State: N.C. Zip: 2759 Contact No: 919-417-2249 Email: 7
APPLICANT: Paul Kimberlee Avery Mailing Address: 320 Arbor Greene Drive
City: State:
ADDRESS: 161 Bay Street, Fuguay-Varina PIN: 0613-42-7381.000
Zoning: Flood: Watershed: Deed Book / Page: 95 E: 1679
Setbacks - Front: 20 Back: 20 Side: 10 Corner: 7
PROPOSED USE: Private
Monolithic SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: #Rooms:Hours of Operation:#Employees:
Addition/Accessory/Other: (Size 20x 20) Use: Storage / work 5hop Closets in addition? () yes (
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)
(Complete Environmental Health Checklist on other side of application if Septic)
boes 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): 5 to a get state.
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 submittee 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's Agent Date
it is the owner/applicants responsibility to provide the county with any applicable information about the autient and it is the owner.
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