

Initial Application Date:	Application #	
COUNTY OF HA	ARNETT RESIDENTIAL LAND USE APPLICATION	www.harnett.org/permits
**A RECORDED SURVEY MAP, RECORDED DEED (OR OF	FFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAN	
	KER Mailing Address: 142 DEER VIEW	
City: SANFORD State: NC Zip:	2733 2 Contact No: (804) 454 - 6874 Email:	
APPLICANT*: CLAYTON HOMES M	Mailing Address: 3340 GILLESPIE ST.	
	2830 & Contact No: (910) 424 - 8600 Email: HC196	6 clayton homes.
ADDRESS: 142 DEER VIEW, SA	NFORD PIN: 9585-05-1351	
Zoning: RA-20R Flood: MIN. Watershed: NO	Deed Book / Page: <u>3948</u> : 0412	
Setbacks – Front: 41.7 Back: 51.5 Side: 23.5	_ Corner:	
PROPOSED USE:		
SFD: (Sizex) # Bedrooms: # Baths:  TOTAL HTD SQ FT GARAGE SQ FT (Is the bo	Basement(w/wo bath): Garage: Deck: Crawl Space:_ onus room finished? () yes () no w/ a closet? () yes () no (	Monolithic Slab:Slab: (if yes add in with # bedrooms)
☐ Modular: (Sizex) # Bedrooms # Baths_ TOTAL HTD SQ FT (Is the second	Basement (w/wo bath) Garage: Site Built Deck: Cfloor finished? () yes () no Any other site built additions? (	on Frame Off Frame ) yes () no
Manufactured Home:SWDWTW (Size _25	8_x_72_)# Bedrooms: 3_ Garage:(site built?) Deck:_	(site built?)
□ Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:TOTAL HTD SC	FT
☐ Home Occupation: # Rooms: Use:	Hours of Operation:	_#Employees:
□ Addition/Accessory/Other: (Sizex) Use:	Closets in add	dition? () yes () no
TOTAL HTD SQ FT ZOILE SQ FT GARAGE NI	<u>4</u>	
Sewage Supply: New Septic Tank Expansion (Complete Environmental Health Checklist on a	ew Well (# of dwellings using well) *Must have operable velocities are time as New Tank County Sewer other side of application if Septic Tank County Sewer of the side of application if Septic)  ufactured home within five hundred feet (500') of tract listed above? (_	)
Does the property contain any easements whether underground		
Structures (existing or proposed). Single family dwellings:	Manufactured Homes: Other (specif	y):
merely state that loregoing statements are accurate and confe	laws of the State of North Carolina regulating such work and the specect to the best of my knowledge. Permit subject to revocation if false i	cifications of plans submitted. nformation is provided.
Signature of Owner or Owner	4 29 202   Date	
to: boundary information, house location, underground incorrect or missing inf	county with any applicable information about the subject property do or overhead easements, etc. The county or its employees are n formation that is contained within these applications.*** nonths from the initial date if permits have not been issued**	y, including but not limited ot responsible for any

APPLICATION CONTINUES ON BACK

strong roots • new growth

