

Initial Application Date: _____

Application # _____

CU#

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 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: DAVID & TAMMY MAY Mailing Address: 71 HEATHER SPRINGS WAY
City: State: SPRING LAKE Zip: 28390 Contact No: 910-331-1634 Email:

APPLICANT: HOLLAND POOLS & CONSTRUCTION Mailing Address: P.O. BOX 330
DAVID HOLLAND City: State: RAEFORD NC Zip: 28376 Contact No: 910-818-1234 Email: HOLLAND POOLS, FENCE @GMAIL.COM
*Please fill out applicant information if different than landowner

ADDRESS: _____ PIN: _____

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE: INGROUND SWIMMING POOL

Monolithic
 SFD: (Size)x# Bedrooms:# Baths:Basement(w/wo bath): Garage: Deck:Crawl Space: Slab: Slab:
TOTAL HTD SQ FT _____ GARAGE SQ FT _____ (Is the bonus room finished?) yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size)x# Bedrooms:# Baths Basement (w/wo bath)Garage: Site Built Deck: OnFrameOff Frame
TOTAL HTD SQ FT _____ (Is the second floor finished?) yes () no Any other site built additions? () yes () no

Manufactured Home: SW DW TW (Size)x #Bedrooms: Garage:(site built?) Deck:(site built?)

Duplex: (Size)xNo. Buildings: _____ No. Bedrooms Per Unit: _____ TOTAL HTD SQ FT _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size)xUse: 14x28 Closets in addition? () yes () no

TOTAL HTD SQ FT _____ GARAGE _____
NO SEPTIC TANK PUBLIC SEWER

Water Supply: County Existing Well New Well (# of dwellings using well) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, ownland that contains a manufactured homewithin 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):

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: _____ Date: 8/23/21

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**

APPLICATION CONTINUES ON BACK