

Initial Application Date: 8 30 2

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| COUNTY OF HARNETT RESIDENTIAL LA Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) | AND USE APPLICATION 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits |
| **A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE P | LAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION** |
| LANDOWNER: Jeffrey Zapawa Mailing Addr | ess: 351 Barons Run West |
| City: State: NC Zip: 28390 Contact No:331 | 6414-4831 Email: Atogtoustons. No |
| APPLICANT*: 67 Cu. Ston Ruyldes Mailing Address: 3924 | 15. Holden RV |
| City: Green Shows State: NC Zip: 2740 Contact No:330 *Please fill out applicant information if different than landowner | 6-395-0525 Email: gt@gtcustons. Mc |
| ADDRESS: 351 Barons Ron West PIN: | 71-5264-000 |
| Zoning: CA W Flood: Watershed: Deed Book / Page: | 3588 pd 99 |
| Setbacks - Front: Back: 100 Side: 32 Corner: 29 | . 0 |
| PROPOSED USE: | |
| □ SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): | Garage: Deck: Crawl Space: Slab: Slab: |
| TOTAL HTD SQ FT GARAGE SQ FT (Is the bonus room finished? () you | es () no w/ a closet? () yes () no (if yes add in with # bedrooms) |
| □ Manufactured Home:SWDWTW (Sizex) # Bedrooms □ Duplex: (Sizex) No. Buildings:No. Bedrooms Per U | |
| | |
| □ Home Occupation: # Rooms: Use: Hours | s of Operation:#Employees: |
| Addition/Accessory/Other: (Sizex) Use: 460 59 Decl | Closets in addition? () yes () no |
| | |
| | Septic Tank County Sewer |
| (Complete Environmental Health Checklist on other side of application if Does owner of this tract of land, own land that contains a manufactured home within five | Septic) a hundred feet (500') of tract listed above? (∠) yes () no |
| Does the property contain any easements whether underground or overhead (<u>U</u>) yes | () no |
| Structures (existing or proposed): Single family dwellings: Deck + Trell Manufactu | ored Homes:Other (specify): |
| If permits are granted I agree to conform to all ordinances and laws of the State of North I hereby state that foregoing statements are accurate and correct to the best of my know | a Carolina regulating such work and the specifications of plans submitted. wledge. Permit subject to revocation if false information is provided. |
| Mil | 2/3/2021 |
| Signature of Owner's Agent | Date |
| ***It is the owner/applicants responsibility to provide the county with any applicato: boundary information, house location, underground or overhead easemer incorrect or missing information that is contain *This application expires 6 months from the initial of the county with any application expires 6 months. | nts, etc. The county or its employees are not responsible for any ined within these applications.*** |

APPLICATION CONTINUES ON BACK

strong roots · new growth