



Initial Application Date: 11/17/2021

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LANDUSE 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: RONALD & ELIZABETH KING Mailing Address: 1760 RAINEY DR.
City: SPRING LAKE State: NC Zip: 28390 Contact No: (910) 494-3302 Email: _____

APPLICANT*: CLAYTON HOMES Mailing Address: 3340 GILLESPIE ST.
City: FAYETTEVILLE State: NC Zip: 28306 Contact No: (910) 424-6600 Email: HC196@claytonhomes.com

ADDRESS: 1760 RAINEY DR. SPRING LAKE, NC PIN: 0514-22-2587

Zoning: RA-20M Flood: N/A Watershed: N/A Deed Book/ Page: 2021/546

Setbacks - Front: 35 Back: 25 Side: 10 Corner: _____

PROPOSED USE:

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: ___ On Frame ___ Off 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 16 x 74) # Bedrooms: 3 Garage: (site built?) Deck: (site built?)

Duplex: (Size ___ x ___) No. Buildings: ___ No. Bedrooms Per Unit: ___ TOTAL HTD SQ FT

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

Addition/Accessory/Other: (Size ___ x ___) Use: ___ Closets in addition? () yes () no
TOTAL HTD SQ FT 1216 GARAGE

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, 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): _____

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

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

strong roots • new growth