



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 SALLY DAWIDKO Mailing Address 429 Highgrove DR  
City SPRING LAKE State NC Zip 28390 Contact No 9106444263 Email sally.dawidko@gmail.com

APPLICANT: \_\_\_\_\_ Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Contact No \_\_\_\_\_ Email \_\_\_\_\_

\*Please fill out applicant information if different than landowner

ADDRESS: 589 RAINY DRIVE PIN: 0514-40-9742-000

Zoning: RES Flood: no Watershed: no Deed Book / Page: 3996:0734

Setbacks - Front: 86 Back: 49 Side: 15 Corner: \_\_\_\_\_

PROPOSED USE:

SFD (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Basement (w/w/o 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/w/o 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 \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ 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 12x25) Use: 2-bedroom Closets in addition? ( ) yes ( ) no  
TOTAL HTD SQ FT 300 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: yes 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

Sally A. Dawidko  
Signature of Owner or Owner's Agent

11-30-2022  
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