

Structures (existing or proposed): Single family dwellings:___

Initial Application Date:_	03/14/23	Application #		
			CU#	
	COUNTY OF HARNETT F	RESIDENTIAL LAND USE APPLIC	CATION	
Central Permitting	108 E. Front Street, Lillington, NC 27546	Phone: (910) 893-7525 ext:2	Fax: (910) 893-2793	www.harnett.org/permits
A RECORDED SU	RVEY MAP, RECORDED DEED (OR OFFER TO PU	RCHASE) & SITE PLAN ARE REQUIRE	D WHEN SUBMITTING A LA	ND USE APPLICATION
LANDOWNER: Mih	vil Pricop	Mailing Address: 310 L	yndham pla	ce dr.
City: Fuguer V	State: NC Zip: 27526	Contact No: 99-588 -89-	Email: 141Ke	Jond melectricion

City: APPLICANT*: Bobert Lee Mailing Address: 425 DUKE MEMORIGI Bd.

City: Louisburg State: NC Zip: 2754 Contact No: 99-723-1822 Email: Grey Kindbuilders // Cegnant *Please fill out applicant information if different than landowner PIN: ADDRESS: Watershed:__ Deed Book / Page: Zoning:__ Flood: Side: Setbacks - Front:____ Back: 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 ____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 7' x 34') Use: Deck Closets in addition? (__) yes (__) no TOTAL HTD SQ FT GARAGE____ Water Supply: ____ County V Existing Well 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 VExisting 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

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

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.

Manufactured Homes:

*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

strong roots · new growth

Other (specify):_