

Initial Application Date:	Application #
	CU#
COUNTY OF HARNETT RESIDENTIAL LAND USE APP Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:	LICATION
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUI	RED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER DONNO LER COUTURE (Truest) Mailing Address 271	o Skycroft Drive.
City: Contord State NC Zip 2732 Antact No: 5731172	Email: Gon Loghootacgmo
APPLICANT HOW POOLS Mailing Address HO BOX E	(29)
City HOP Millo Star C Zin 2824 Contact No.	327 Email: Cheryl@parrottoaypa
*Please fill out applicant information if different than landowner ADDRESS: A Sky A Drue South Print: Applicant information if different than landowner ADDRESS: A Sky A Sk	
Zoning: Flood: Watershed: Deed Book / Page:	
Setbacks - Front: Back: Side: Corner:	
PROPOSED USE:	
☐ SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage:	
TOTAL HTD SQ FTGARAGE SQ FT(Is the bonus room finished? () yes () no w/	a closet? () yes () no (if yes add in with # bedrooms)
☐ Modular: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: TOTAL HTD SQ FT (Is the second floor finished? () yes () no Any of	
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage	:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings:No. Bedrooms Per Unit:	TOTAL HTD SQ FT
Home Occupation: # Rooms: Use: Hours of Operation:	#Employees:
X Addition/Accessory/Other: (Size 10 x 16) Use: Inylound Sulimming Pool Closets in addition? (_) yes (X) no	
TOTAL HTD SQ FT GARAGE	
Water Supply: County Existing Well New Well (# of dwellings using well (Need to Complete New Well Application a Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank (Complete Environmental Health Checklist on other side of application if Septic)	t the same time as New Tank)
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 (X) 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 regul I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit	lating such work and the specifications of plans submitted. subject to revocation if false information is provided.
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Signature of Owner's Agent ***It is the owner/applicants responsibility to provide the county with any applicable information	'Date \ n 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**	
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APPLICATION CONTINUES ON BACK

strong roots · new growth