

				COUNT	Y			
Initial Application Date:_	6.6.2023	NORTH CAROLINA Application #						
							CLI#	
Central Permitting	420 McKinney	COUNTY OF HAF y Pkwy, Lillington, NC						www.harnett.org/perm
A RECORDED S	URVEY MAP, REC	ORDED DEED (OR OFFI	ER TO PURCH	ASE) & SITE PLA	N ARE REQUIRED	WHEN SUBI	IITTING A LAN	ID USE APPLICATION
J2M2 Ho	oldings, LLC and	l Blue Kizer Investme	ents	Mailing Addres	271 Village	Grande Dr		
City: Ponte Vedra		FL 3 State: Zip:	32081 Cor	253- ntact No:	448-0662	Email:	sandhillshol	dings@gmail.com
J2M2 Holdii APPLICANT*:	ngs, LLC and B	lue Kizer Investments Ma	s ailing Addres	271 Village s:	Grande Dr			
City: Ponte Vedra		_ State: FL Zip:_3	32081 Cor	ntact No: 253-	448-0662	Email:	sandhillshol	dings@gmail.com
*Please fill out applicant inform				0	E0E 36 0066 00	0		
ADDRESS: 656 Winding	Ridge, Saniord			PIN:	585-36-8066.00			
Zoning: RA-20R Floo	N/A od:	Watershed: N/A	Deed E	Book / Page: _	4194 / 1473			
Setbacks – Front:								
Selbacks - Front	Dack	Side	Corner					
PROPOSED USE: ☐ SFD: (Sizex_) # Bedroor	ns:# Baths:F	3asement(w/	/wo bath):	Garage: De	eck:Cı	awl Space:_	Stem Wall Monolith Slab: Slab:
TOTAL HTD SQ FT	GARAGE SQ	FT (Is the bor	nus room finis	shed? () yes	() no w/ac	loset? ()	yes () no	(if yes add in with # bed
D. Madalaa (O'aa) // D - d	"Dath	D	t footoe to the	0	O'the Devilled	Daraha (0, 5,
☐ Modular: (Size				, , ,		_	<u></u>	·
TOTAL HTD SQ FT		(is the second in	loor linished	? () yes (_) no Any othe	r site built a	ddilions? (_) yes () no
Manufactured Home:	:sw_X_D	WTW (Size28	x <u></u> 70)	# Bedrooms: _	4 Garage: N	/ <u>/</u> (site built?) Deck: <u></u>	N/A (site built?)
☐ Duplex: (Size)	() No. Bui	ldings:	No. Bed	Irooms Per Uni	::	TO	OTAL HTD S	Q FT
☐ Home Occupation: #	Rooms:	Use:		Hours o	f Operation:			#Employees:
☐ Addition/Accessory/C	Other: (Size	x) Use:					Closets in ac	ddition? () yes () r
TOTAL HTD SQ FT		GARAGE						
.,								
Water Supply: X Coι	intyExis	sting WellNe	w Well (# of	dwellings usin	g well Application at the)*Must ha	ve operable	water before final
Sewage Supply: Ne	w Septic Tank _	Expansion	_Relocation_	Existing S	eptic Tank X			i <mark>k</mark>)
<mark>Complete)</mark> Does owner of this tract of		Health Checklist on on that contains a manu				O') of tract li	sted above?	() yes (X) no
Does the property contain	any easements	whether undergroun	ıd or overhea	ad () yes	<u>X</u>) no			
Structures (existing or pro	nosed): Single f	amily dwellings:		Manufacture	d Homes. 28 x	70 DWMH	Other (spec	oify).

6.6.2023 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

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.

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