



Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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 SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

LANDOWNER: The Life House Partnership, LLC Mailing Address: 105 Port Tack
City: Sanford State: NC Zip: 27332 Contact No: 37332 Email: thelifehousepartnership@gmail.com

APPLICANT*: The Life House Partnership, LLC Mailing Address: 105 Port Tack
City: Sanford State: NC Zip: 27332 Contact No: 914 512 0417 Email: thelifehousepartnership@gmail.com

*Please fill out applicant information if different than landowner

ADDRESS: 84 Ravens Wood Cir, Sanford, NC 27332 PIN: 9585-99-8661.000

Zoning: RA-20R Flood: Minimal Watershed: 137 Deed Book / Page: bk 4178 p 1235-1236 (2)

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

PROPOSED USE:

[] SFD: (Size ___ x ___) # Bedrooms: ___ # Baths: ___ Basement(w/wo bath): ___ Garage: ___ Deck: ___ Crawl Space: ___ Slab: ___ Slab: Monolithic
TOTAL HTD SQ FT GARAGE SQ FT (Is the bonus room finished? () yes () no w/ a closet? () yes (X) 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: ___

[X] Addition/Accessory/Other: (Size 15 x 20) Use: Kitchen Remodel Closets in addition? () yes (X) no

TOTAL HTD SQ FT 1470 300 GARAGE 704

Water Supply: ___ County [X] 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 [X] 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 (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

Structures (existing or proposed): Single family dwellings: 1 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.

Signature of Owner or Owner's Agent: [Signature] Date: 9 May 2023

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