



Harnett COUNTY

10501 N. ZION ST. LILLINGTON, NC 27546

Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 105 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: James Schumacher Mailing Address: 479 DL Phillips Ln
City: Broadway State: NC Zip: 27505 Contact No: 919-897-9344 Email: jmschumacher2016@gmail.com

APPLICANT: Mr. Smartstack Chimney Service Mailing Address: 203 N. Main St
City: Broadway State: NC Zip: 27505 Contact No: (919) 747-1859 Email: franchise@smartstack.com

*Please fill out applicant information if different than landowner

ADDRESS: _____ PIN: _____

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: _____ 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 5' x 3') Use: outdoor fireplace Closets in addition? () yes () no
TOTAL HTD SQ FT 15 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: _____ 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

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



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Cheryl Schumacher Date: 8/18/23
Site Address: 479 DL Phillips Ln, Broadway, NC 27505 Phone: 919-897-9344
Subdivision: _____ Lot: _____
Description of Proposed Work: description attached w/draws Total Job Cost: \$ 29,440

General Contractor Information

N/A Mr. Smokestack Chimney Service Telephone: 919-747-1859
Building Contractor's Company Name
203 N. Main St. Broadway Email Address: _____
Address
N/A HEATED SQ FT _____ GARAGE SQ FT _____
License # _____

Electrical Contractor Information

Description of Work: Install elec outlet Service Size: _____ Amps T-Pole: Yes No
Harte Electric LLC Telephone: (919)-639-6851
Electrical Contractor's Company Name
7836 Hwy 55 S, Willow Spring, NC 27540 Email Address: harteelectric@gmail.com
Address
23339
License # _____

Mechanical/HVAC Contractor Information

Description of Work: Gas line installation of fireplace chimney (description attached)
Mr. Smokestack Chimney Service Telephone: (919)-747-1859
Mechanical Contractor's Company Name
203 N Main St Broadway, NC 27505 Email Address: friends@mrsmokestack.com
Address
34313
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

*NOTE: General Contractor / owner must fill out and sign the second page of this application.