



Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, 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: J2M2 Holdings, LLC Mailing Address: 271 Village Grande Dr
City: Ponte Vedra State: FL Zip: 32081 Contact No: 253-448-0662 Email: sandhillsholdings@gmail.com

APPLICANT*: J2M2 Holdings, LLC Mailing Address: 271 Village Grande Dr
City: Ponte Vedra State: FL Zip: 32081 Contact No: 253-448-0662 Email: sandhillsholdings@gmail.com

*Please fill out applicant information if different than landowner

ADDRESS: 384 McKay Dr. Spring Lake, NC PIN: 0514-11-4849

Zoning: RA20A Flood: N/A Watershed: N/A Deed Book / Page: 3994-82

Setbacks - Front: 30 Back: 72 Side: 15 Corner: N/A

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 28 x 70) # Bedrooms: 3 Garage: N/A(site built? ___) Deck: N/A(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 ___x___) Use: ___ Closets in addition? () yes () no
TOTAL HTD SQ FT GARAGE

Water Supply: X 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 X 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 (X) no

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

Structures (existing or proposed): Single family dwellings: ___ Manufactured Homes: 28 x 70 DWMH 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 10-27-23

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