



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:1 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

RMS Investments LLC d/b/a One27Homes

LANDOWNER: _____ Mailing Address: 114 W. Main Street

City: Clayton State NC Zip: 27520 Contact No: _____ Email: brittany@one27homes.com

APPLICANT*: RMS Investments Mailing Address: 114 W. Main Street

City: Clayton State NC Zip: 27520 Contact No: (919)909-9426 Email: brittany@one27homes.com

*Please fill out applicant information if different than landowner

ADDRESS: Prospect Church Road, Dunn, NC PIN: 1508-07-2638.000

Zoning: RA 30 Flood: NO Watershed: _____ Deed Book / Page: 3972/0051

Setbacks - Front: 35 Back: 25 Side: 10 Corner: 20

PROPOSED USE:

X SFD: (Size 26' x 40') # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: X Monolithic Slab: _____
TOTAL HTD SQ FT 1314 GARAGE SQ FT 447 (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 _____ 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 _____ 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: Brittany Radziszewski

Date: 12/12/23

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

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