

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

LANDOWNER Jim Casper Mailing Address 905 Cokebury Rd.
City Fugate-Varina State NC Zip 27526 Contact No 919-349-0038 Email jamescasper@gmail.com

APPLICANT: Triangle Home Solutions Mailing Address 4304 Ellinwood Dr.
City Apex State NC Zip 27539 Contact No 919-795-8596 Email chuck@thsn.com
*Please fill out applicant information if different than landowner

ADDRESS: 905 Cokebury Rd. PIN: _____

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

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

PROPOSED USE:

SFD (Size 22 x 12) # Bedrooms _____ # Baths _____ Basement (w/w/o 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/w/o 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 22 x 12) Use Deck Closets in addition? yes no
TOTAL HTD SQ FT _____ 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): Deck

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

12/14/23
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