

Initial Application Date:	Application #			
			CU#	
		IDENTIAL LAND USE APPLIC Phone: (910) 893-7525 ext:1		www.harnett.org/permits
A RECORDED SURVEY MAP, RECORD	ED DEED (OR OFFER TO PURCH	IASE) & SITE PLAN ARE REQUIRED	WHEN SUBMITTING A LAN	D USE APPLICATION
LANDOWNER: Porter Built Homes		Mailing Address: 2664 Tir	nber Dr. Suite 115	5
Garner City:St	rate: NC Zip: 27529 Col	ntact No: 919-390-9117	_{Email:} chris@po	orterbuiltnc.com
APPLICANT*: Porter Built Homes, I	LC Mailing Addres	s. 2664 Timber Dr. S	uite 115	
City: Garner St *Please fill out applicant information if different than				orterbuiltnc.com
ADDRESS: 285 Deer Tail Ln. Fuqu				
Zoning: RA-30 Flood: Minimal W			1.000	-
Setbacks - Front: 35' Back: 25'				
	Side:Corner:	<u> </u>		
PROPOSED USE:				Monolithic
SFD: (Sizex) # Bedrooms:_		· · · · · · · · · · · · · · · · · · ·		
TOTAL HTD SQ FTGARAGE SQ FT_	(is the bonus room fini	sned? () yes () no w/ a c	oset? () yes (_^_) no	(If yes add in with # bedrooms)
☐ Modular: (Sizex) # Bedroom	ns # Baths Basemer	it (w/wo bath) Garage:	Site Built Deck: 0	On FrameOff Frame
TOTAL HTD SQ FT	(Is the second floor finished	? () yes () no Any other	site built additions? (_) yes () no
5 H () H () W (T. 1. (0)		/ //	(), (), ()
☐ Manufactured Home:SWDW _	IW (Sizex) # Bedrooms: Garage:	_(site built?) Deck:_	(site built?)
□ Duplex: (Sizex) No. Building	gs: No. Bed	drooms Per Unit:	TOTAL HTD SO	Q FT
☐ Home Occupation: # Rooms:	Use:	Hours of Operation:		#Employees:
Addition/Accessory/Other: (Sizex) Use: MEDIA ROOM &	CRAFT ROOM. See Plans	Closets in ad	Idition? () yes (_X) no
720	RAGE			,, ,,
Water Supply: X County Existing	WellNew Well (# of	dwellings using well) *Must have operable	water before final
Sewage Supply: New Septic Tank	Expansion Relocation	blete New Well Application at the X Existing Septic Tank		K)
(Complete Environmental Head Does owner of this tract of land, own land that)') of tract listed above?	() yes (<u></u>) no
Does the property contain any easements wh	ether underground or overhe	ad () yes (_X_) no		
Structures (existing or proposed): Single fami	ly dwellings:	Manufactured Homes:	Other (spec	ify):
If permits are granted I agree to conform to all hereby state that foregoing statements are a	ccurate and correct to the be	st of my knowledge. Permit sub	ng such work and the spo eject to revocation if false 1/10/2024	ecifications of plans submitted. e information is provided.
	f Owner or Owner's Agent	any applicable information of	Date	ty including but not limited
it is the owner/applicants responsibility	to provide the county with	any applicable information at	out the subject proper	ty, including but not limited

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