



Initial Application Date: 9/12/24

Application # BRES2408-
CU# 0075

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: Heather Watson Mailing Address: 85 Dove Trail
City: Sanford State: NC Zip: _____ Contact No: _____ Email: _____

APPLICANT: Heather Watson Mailing Address: 85 Dove Trail
City: Sanford State: NC Zip: 27332 Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner
ADDRESS: 85 Dove Trail Sanford NC 27332 PIN: 9596-01-6443-000
Zoning: RA-20R Flood: _____ Watershed: _____ Deed Book / Page: 04170/1982

Setbacks - Front: 66 Back: _____ Side: 13 Corner: 27

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: 3 # Baths: 2 Basement (w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: Slab: Monolithic 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 _____ LW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built?) Deck: _____ (site built?)
TOTAL HTD SQ FT _____

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____ #Employees: _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____
 Addition/Accessory/Other: (Size 12x29 Use: bedroom addition & masonry work power) Closets in addition? () yes (X) no
TOTAL HTD SQ FT 144 GARAGE 204
348 sq. ft.

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank County Sewer
(Need to Complete New Well Application at the same time as New Tank)

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.

Heather Watson
Signature of Owner or Owner's Agent
Date 8/29/24

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