

10-21-24 Initial Application Date:

Application # _		
	CU#	
	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: Adam Lewis	Mailing Address:						
City: Sanford	State: NC Zip: 27332	Contact No:	Email: _ac	dam.lewis1515@gmail.com			
APPLICANT*: Adam Lewis	Mailing Add	dress: 228 Thistle CT.					
APPLICANT*: Adam Lewis City: Sanford *Please fill out applicant information if different the	State: NC Zip: 27332	Contact No:	Email:	idam.lewis1515@gmail.com			
ADDRESS: 228 Thistle CT. Sanford, NC 27332 PIN: Zoning: Residential Flood: Watershed: Deed Book / Page: 3955/682							
			2	2			
Setbacks – Front: 35' Back: 25' PROPOSED USE: 10'x16" wood she							
PROPOSED USE: 10 x 10 wood sile	d III backyard			Monolithic			
☐ SFD: (Sizex) # Bedroom	ns: # Baths: Basemer	nt(w/wo bath): Garage:_	Deck: Crav				
TOTAL HTD SQ FTGARAGE SQ F	T (Is the bonus room	finished? () yes () no	w/ a closet? () ye	es () no (if yes add in with # bedrooms			
☐ Modular: (Sizex) # Bedr							
TOTAL HTD SQ FT	_ (Is the second floor finis	hed? () yes () no Ar	ny other site built add	litions? () yes () no			
☐ Manufactured Home:SWD\	WTW (Sizex) # Bedrooms: Gara	age:(site built?) Deck:(site built?)			
☐ Duplex: (Sizex) No. Buil	dings:No.	Bedrooms Per Unit:	тот	AL HTD SQ FT			
☐ Home Occupation: # Rooms:	Use:	Hours of Operati	on:	#Employees:			
X Addition/Accessory/Other: (Size 10'	_x_16' Use:_10'x16" wo	ood shed in backyard	c	losets in addition? () yes (X) no			
TOTAL HTD SQ FT	SARAGE 160	_					
Water Supply: Y County Exis	sting Well No New Well (Need to C	# of dwellings using well omplete,New Well Application) *Must have	e operable water before final			
Sewage Supply: New Septic Tank _	Expansion Reloca	tion_X Existing Septic Tar	nk County Sew	er			
(Complete Environmental Does owner of this tract of land, own land	Health Checklist on other sid	le of application if Septic)		A.F.			
Does the property contain any easements	whether underground or over	erhead () yes No no					
Structures (existing or proposed): Single fa	amily dwellings:	Manufactured Homes	:(Other (specify): Pre-built shed			
If permits are granted I agree to conform t I hereby state that foregoing statements a	re accurate and correct to the						
Ada	em Lewis		10-21-24				

Signature of Owner or Owner's Agent ***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