

Initial Application Date: 11/12/2024

Application #_	
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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**
City: Coats State: NZ Zip: 27521 Contact No: (910) 985-1870 Email:
City: State: MC Zip: L1321 Contact No: C1007 (03 - 1010 Email:
APPLICANT*: STS Construction, LC Mailing Address: 2661 NC-55 W Couts, NZ 27521
City: Coate State: NZ Zip: 27521 Contact No: (919) 605-8003 Email: Josh@ StS construct.com *Please fill out applicant information if different than landowner
ADDRESS: Zleb 1 NC-55 W COUTS, NZ 27521 PIN:
Zoning: Flood: Watershed: Deed Book / Page:
Setbacks - Front: Back: Side: Corner:
PROPOSED USE:
□ SFD: (Size 1/2 x 33) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Monolithic Slab: TOTAL HTD SQ FT 528 GARAGE SQ FT (Is the bonus room finished? (_) yes (_) no w/ a closet? (_) yes (_) no (if yes add in with # bedrooms)
☐ Modular: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT
□ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:  Foundation + Loof are constructed
Addition/Accessory/Other: (Size 16 x 33) Use: Making living Space   Sim Room   Closets in addition? (_) yes (_) no
TOTAL HTD SQ FT_523 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 Fault 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
Does the property contain any easements whether underground or overhead () yes () no  Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify): Space  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 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