

Initial Application Date:			Application #	
				CU#
Central Permitting 420 McKing		RESIDENTIAL LAND USE Phone: (910) 893-7525		10. 化八块 多数过滤器
"A RECORDED SURVEY MAP, R	ECORDED DEED (OR OFFER TO P	URCHASE) & SITE PLAN ARE F	REQUIRED WHEN SUBM	ITTING A LAND USE APPLICATION**
LANDOWNER Bradley P.	Cala	Mailing Address:	2215 416 61	- 6
LANDOWNER BYOUNG T.	Cole			
city: Dunn	State: NC Zip: 28330	Contact No: (410) 818	8-2036 Email:	brackleypcole @gmail.com
APPLICANT*:	Mailing A	ddress:		
City:*Please fill out applicant information if different	State: Zip: nt than landowner	Contact No:	Email:	
ADDRESS:		PIN:		
Zoning:Flood:				
Setbacks - Front: Back:			-	
Setbacks - Front: Back:	Side: Come	r.		
PROPOSED USE:				Monolithic
☐ SFD: (Sizex) # Bedro	ooms # Baths Baseme	ent(w/wo bath): Garage	: Deck: Cra	
TOTAL HTD SQ FTGARAGE S	Q FT (Is the bonus roo	m finished? () yes () n	no w/ a closet? () y	es () no (if yes add in with # bedroom
TOTAL HTD SQ FTSW	_DWTW (Sizex_) # Bedrooms: Ga	arage:(site built?) Deck:(site built?)
☐ Duplex: (Sizex) No. I	Buildings:No	b. Bedrooms Per Unit:		TAL HTD SQ FT
☐ Home Occupation: # Rooms:	Use:	Hours of Opera	ation:	#Employees:
Addition/Accessory/Other (Size _	16 x 32) Use: In-C	bround Puol		Closets in addition? () yes () no
TOTAL HTD SQ FT	GARAGE	MARKET MA		
Water Supply: New Septic Tar	Existing Well New Well (Need to	(# of dwellings using well _ Complete New Well Application \(\) Existing Septic Ta) *Must have tion at the same time ank County Se	re operable water before final as New Tank) wer
Complete Environmen	ital Health Checklist on other's	ide of application if Septic)		
Does owner of this tract of land, own la				
Does the property contain any easeme Structures (existing or proposed): Sing	nts whether underground or ov	verhead () yes (_\(\sum_{\text{\tint{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex		Fustone
Structures (existing or proposed): Sing	le family dwellings: 1500 Sf	Manufactured Home	es:	Other (specify): wetal building
I hereby state that foregoing statement	is are accurate and correct to the	he best of my knowledge. P	ermit subject to revol	
- To Ca	ature of Owner or Owner's Ag	gent	3/24/2 Date	5_
to: boundary information, house	sibility to provide the county e location, underground or o incorrect or missing informa	verhead easements, etc. T	The county or its em	bject property, including but not limite ployees are not responsible for any s.***

APPLICATION CONTINUES ON BACK

strong roots · new growth

*This application expires 6 months from the initial date if permits have not been issued**