Harnett COUNTY
NORTH CAROLINA

Initial Application Date:_____ Application # _____

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: Dave Ertekeed Mailing Address: 122 Chrystal Point

City: Sanford State: NC Zip: 27332 Contact No.(714) 371-5119 Email: _____

APPLICANT*: Joseph Bednarek Mailing Address: 304 Pineridge Cove

City: Sanford State: NC Zip: 27332 Contact No.(910) 362-1268 Email: bedbass1962@yahoo.com

*Please fill out applicant information if different than landowner

ADDRESS: _____ **PIN:** _____

Zoning:_____ **Flood:**_____ **Watershed:**_____ **Deed Book / Page:** _____

Setbacks – Front:_____ **Back:**_____ **Side:**_____ **Corner:**_____

PROPOSED USE:

☐ SFD: (Size 8 x 16 Extention) # Bedrooms:___ # Baths:___ Basement(w/wo bath):___ Garage:___ Deck: X Crawl Space:___ Slab:___ Monolithic Slab:___

TOTAL HTD SQ FT 128 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 ___TW (Size_____x_____) # Bedrooms: ____ Garage:____(site built?____) Deck:____(site built?____)

☐ Duplex: (Size ____x_____) No. Buildings:_____ No. Bedrooms Per Unit:_____ TOTAL HTD SQ FT_____

☐ Home Occupation: # Rooms:_____ Use:_____ Hours of Operation:_____ #Employees:_____

☑ Addition/Accessory/Other: (Size 24 x 21) Use: Roof over Existing Deck Closets in addition? (__) yes (__) no

TOTAL HTD SQ FT 714 GARAGE_____

Water Supply: _____ County X Existing Well _____ New Well *(# of dwellings using well _____)* ***Must have operable water before final**

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank X County Sewer (Need to Complete New Well Application at the same time as New Tank) (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

Structures (existing or proposed): Single family dwellings:_____ 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.

Joseph Bednarek 4-19-2025

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