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RESIDENTIAL LAND USE APPLICATION

SITE ADDRESS: 655 Neills Creek Rd. PIN: 0660-86-2746.000
LANDOWNER: Owen T. Scarborough Mailing Address: 506 Tirzah Dr
City: Lillington State: NC Zip: 27546 Phone: 910-890-3511 Email: Owent Scarborough@gmail.com

*Please fill out applicant information if different than landowner.

APPLICANT: _____ Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone: _____ Email: _____

PROPOSED USE:

☐ Single Family Dwelling: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Garage: Attached, Detached Accessory: Deck, Patio, Porch
(Circle One) (Circle One)

TOTAL HTD SQ FT: _____ GARAGE SQ FT: _____ Foundation Type: Crawl Space: ☐ Stem Wall: ☐ Mono Slab: ☐ Basement: ☐

☐ Modular: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Garage: Attached, Detached Accessory: Deck, Patio, Porch
(Circle One) (Circle One)

TOTAL HTD SQ FT: _____

☐ Manufactured Home: SW ☐ DW ☐ TW ☐ (Size _____ x _____) # Bedrooms: _____ Garage: Attached, Detached Accessory: Deck, Patio
(Circle One) (Circle One)

ZONING: _____

☐ Duplex: (Size _____ x _____) # Buildings: _____ # Bedrooms Per Unit: _____ TOTAL HTD SQ FT: _____

☒ Addition/Accessory/Other: (Size 54 x 40) Use: 30x40 enclosed Shop with 12' Lean-to on both sides
will be used for storage of tools, atvs, etc.

UTILITIES:

Water Supply: County ☐ Existing Well ☐ New Well (# of dwellings using well _____) ☐

Sewage Supply: New Septic Tank ☐ Expansion ☐ Relocation ☐ Existing Septic Tank ☐ County Sewer ☐

(Complete Environmental Health Checklist on other side of application if Septic is selected)

GENERAL PROPERTY INFORMATION:

Does the landowner own another tract that contains a manufactured home within 500 feet? YES ☐ NO ☒

Does the property contain any easements, whether underground or overhead? YES ☒ NO ☐

Structures (existing or proposed): Single Family Dwellings: 8 Manufactured Homes: 0 Other (specify): 0

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 the foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Owen Scarborough
Signature of Owner or Owner's Agent

8-14-25
Date

Permits are valid for 6 months from the issue date, or 12 months from last inspection once inspections have been initiated. It is the owner/applicant's 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.

APPLICATION CONTINUES ON BACK