

Initial Application Date: 4/13/18

Application # 18-50043022
DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: HARNETT COUNTY SCHOOLS Mailing Address: 1008 S. 11TH STREET

City: LILLINGTON State: NC Zip: 27546 Contact # 910-893-8151 Email: dmclean@harnett.k12.nc.us

APPLICANT*: MUTER CONSTRUCTION Mailing Address: 100 N. ARENDELL AVE

City: ZEBULON State: NC Zip: 27597 Contact # 919-404-8330 Email: lbraddy@muterconstruction.com

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: BRYAN BRADY Phone # 919-495-3667

PROPERTY LOCATION: Subdivision: Overhills High School Lot #: _____ Lot Size: 59.49 AC

State Road # 2495 State Road Name: RAY ROAD, SPRING LAKE, NC Map Book&Page: 2002, 0465

PIN Parcel: 0501-94-1449-000 PIN: 01.0513.0201

Zoning: PR-20M Flood Zone: V Watershed: NA Deed Book&Page: 1291, 0496 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HEAD SOUTH DOWN NC-210S
AND TAKE LEFT ON OVERHILLS ROAD. TAKE 2nd RIGHT AVE
TO RAY ROAD.

PROPOSED USE:

- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Business Sq. Ft. Retail Space: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____
- Accessory/Addition/Other (Size 31'4" x 73') Use: EDUCATIONAL - DINING ROOM ADDITION

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *MUST have operable water before final
Sewage Supply: _____ New Septic Tank (Complete Checklist) _____ Existing Septic Tank (Complete Checklist) County Sewer

Comments: _____

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.

Bryan Brady
Signature of Owner or Owner's Agent

4/12/18
Date

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

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION