

Initial Application Date: 7-1-13
~~12-1-11~~

Application # 11500 27979R
~~12-2-11~~

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 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: Matthew C. Vaughn Mailing Address: Idle Mels Meadows Dr
City: Fuquay Varina State: NC Zip: 27526 Contact No: 919-810-2023 Email: _____

APPLICANT*: Barry Heroux SAUCE Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: 919 616 4387 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Matt Vaughn Phone # 919-810-2023

PROPERTY LOCATION: Subdivision: MELS MEADOW Lot #: 45 Lot Size: 1.27 AC. 54600 sq.ft.
State Road # 1412 State Road Name: CHRISTAIN LIGHT Rd. Map Book & Page: 98, 35

Parcel: 050645 002213 PIN: 0645-35-6219.000

Zoning: RA-30 Flood Zone: X Watershed: WS-IV Deed Book & Page: 1357, 686 Power Company*: Progress Energy

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

PROPOSED USE:

- SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Monolithic Slab: _____
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms))
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(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: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size 32x24 x 24) Use: Change roof Deck to Bonus Room Closets in addition? () yes () no

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

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): _____

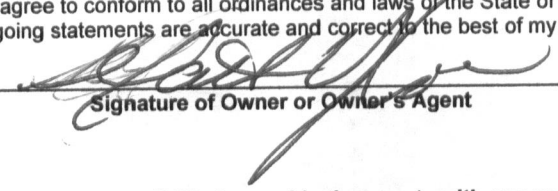
Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>176</u>
Rear	<u>25</u>	<u>45</u>
Closest Side	<u>10</u>	<u>34</u>
Sidestreet/corner lot	<u>20</u>	
Nearest Building on same lot	<u>6</u>	

Comments: 7-1-13 House will be 4bed, 3 Br, 2 1/2 Bath
Add ite hole in 32x24 Fin Bonus Room. Not doing Add ite. only changing Roof Deck into 32x24 Bonus

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 N, LEFT ON CHRISTIAN LIGHT RD.
GO 4 MILES. ~~WHERE~~ THIS WILL BE ONE MILE BEFORE
HWY 42 YOU WILL MAKE A LEFT ONTO MEL'S MEADOW DR.
60 IS THE FRIST HOUSE ON THE LEFT

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

11-29-11

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

W. W. W. J. C. JANE H. H.
D.B. 10.22

CHPL (R/W UNKNOWN)

SITE PLAN APPROVAL 32X24 Change Exist roof deck into Bonus Room
DISTRICT RA30 USE 3 Exist 1 Add. 4 Total
#BEDRO 12-1-11 N.C. [Signature]
Zoning Administrator
Date 7-1-13

61' -

192.25'

7-1-13

1-50

44

AREA = 43,009 SQ. FT.

N 05°04'10"E 280.1'

N 05°38'59"E 280.01'

196'

47

280.00'

46

S 05°03'33"W

152.19'

195.13'

10'

10' TEMP. CON
N 84°56'27" W 923.96'

OWS DRIVE (50' PUBLIC R/W)

N 84°56'27"W 923.96'

44'

EXIST GROUND POOL

EXISTING SFD

DRIVE

DRAINAGE EXHAUST (WITH VALVES)

5'

34'

P.P.

C.V.L (APPT)