Initial Application Date:



CU#

on same lot

Residential Land Use Application

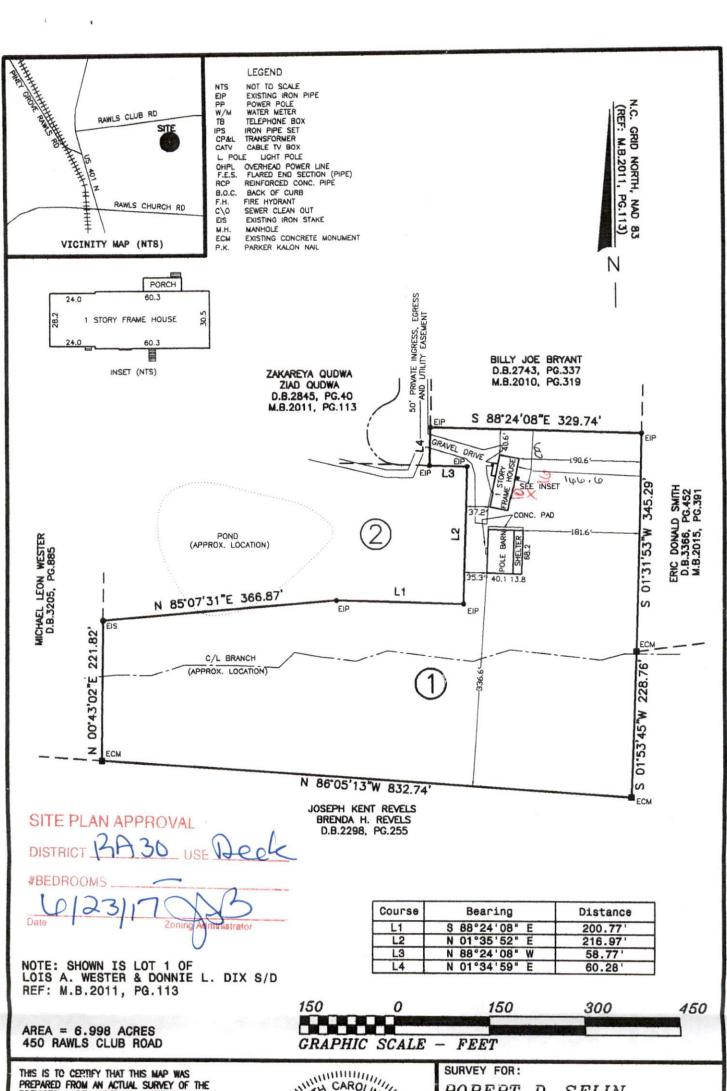
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION Mailing Address: 450 Rawls State: NC Zip: 275 Contact No: 919 418 2363 mail: APPLICANT*: _ Mailing Address:_ State:_ Zip: Contact No: City: *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: State Road Name: _ Rawls XU68 03 Watershed: Deed Book & Page: 299 Power Company*: *New structures with Progress Energy as service provider need to supply premise number from Progress Energy. PROPOSED USE: Monolithic SFD: (Size ____x ___) # Bedrooms: __ # Baths: __ Basement(w/wo bath): ___ Garage: __ Deck: __ Crawl Space: __ 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: Use: Addition/Accessory/Other: (Size 24 x 24) Use: De c K Closets in addition? (_) yes (X) 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 Manufactured Homes:_____ Other (specify):___ Other Structures (existing of proposed). Single family dwellings: Required Residential Property Line Setbacks: Comments: Front Minimum Rear Closest Side Sidestreet/corner lot Nearest Building

SPECIFIC DIRECTIONS TO T	HE PROPERTY FRO	M LILLINGTON: _	401	North to	Raw	15 Club	Rd	_
turn right	on Rawls	elub Rd	about	a mile	on ris	Lt upo	lirt	_
path Gray	house					•		_
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If permits are granted I agree to I hereby state that foregoing st	tatements are accurate	e and correct to the	e best of my k		t subject to rev	ocation if fals		
*	Signature of Own	or Owner's Age	nt		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**



PREPARED FROM AN ACTUAL SURVEY OF THE PREMISES, MADE UNDER MY SUPERVISION, AND

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ROBERT SELIN