

Initial Application Date: ~~6-30-16~~  
7-15-16

Application # 1150039015R **SCANNED**

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

**\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\***

LANDOWNER: Christa L. Duncan & Randy Mailing Address: 153 Sherman Lakes Dr.  
City: Fuquay Varina State: NC Zip: 27526 Contact No: 224-422-1577 Email: cduncan3@gmail.com

APPLICANT\*: Same Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Josh Palmquist Phone # 443-534-1689

PROPERTY LOCATION: Subdivision: Sherman Lakes Lot #: 4 Lot Size: 1.23AK

State Road # 153 State Road Name: Sherman Lakes Map Book & Page: PC # / S90A

Parcel: 08 0655 0118 10 PIN: 0655-44-1279.000

Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 3227 / 615 Power Company\*: Duke Energy Progress

\*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: \_\_\_\_\_ 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 25x25 ~~30x30~~) Use: Det Garage 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: 1 ext SFD Manufactured Homes: \_\_\_\_\_ Other (specify): 1 proposed Det Garage

**Required Residential Property Line Setbacks:**

	Minimum	Actual
Front	<u>35</u>	<u>100</u>
Rear	<u>25</u>	<u>25+</u>
Closest Side	<u>10</u>	<u>13</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Turn left onto US 401 N/W  
Cornelias Harnett Blvd, stay on for 10 miles then turn  
left onto Sherman Lakes Dr.

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.

Christina Benson

Signature of Owner or Owner's Agent

6-26-16

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\*\*

SITE PLAN APPROVAL Garage

DISTRICT RA-30 USE Garage

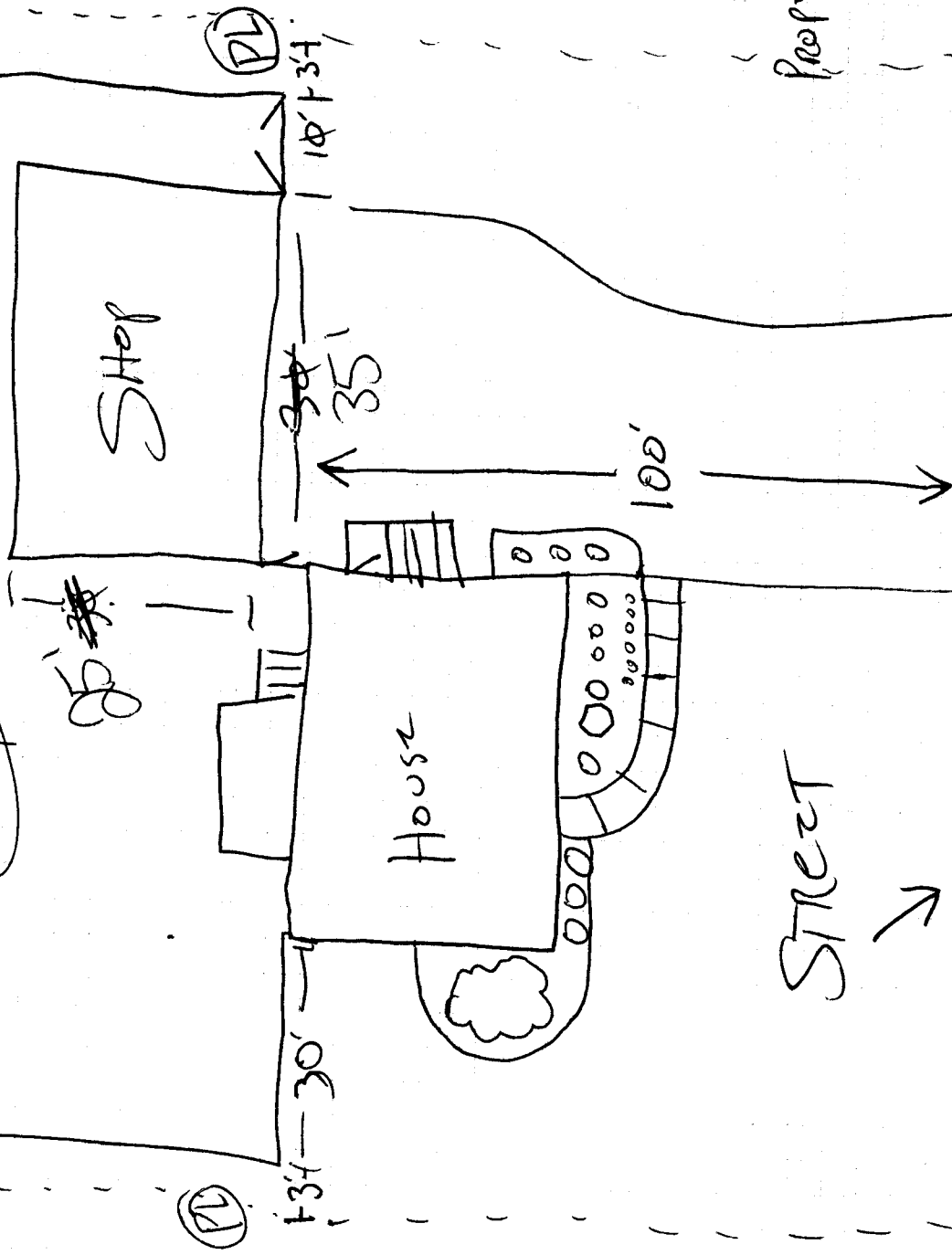
#BEDROOMS 2

Lozotte

Zoning Administrator

Date 7-15-10

*[Handwritten signature and scribbles]*



STREET  
↗

Property Line = PL  
⋮