	Initial Application Date: \$\int - 29 - 12\$  Application # 125 00 29646
	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**
	App : Clayte Hour Mailing Address: 3341 Allespie Street
	City: Fratbulle State: NE Zip: 233 26 Contact No: 910-424-86 06 Email:
	APPLICANT': Janes James DAVIS Mailing Address: 405 Pitton FC
.01	City: Loude State: 1/2 Zip: 23358 Contact No: 910-734-9782 Email:  *Please fill out applicant information if different than landowner of the state o
~ij .	CONTACT NAME APPLYING IN OFFICE:Phone #
	PROPERTY LOCATION: Subdivision: Lot #: 75 Lot Size:
	State Road # 27 W State Road Name: 27 W Map Book & Page: 2000   35 9
	Parcel: 0 0 10 10 10 10 10 10 10 10 10 10 10 10
	Zoning: #A 2016-lood Zone: Watershed: Deed Book & Page: Power Company*:
	*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
	PROPOSED USE:
	SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab:
1	(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
	Mod: (Size 28 x 7/2 ) # Bedrooms 3 # 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
	Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
	Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
	Addition/Accessory/Other: (Sizex) Use: 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: Comments:
	35.45
	75 37
	79
	Closest Side
	Nearest Building
	on same lot  Residential Land Use Application  Page 1 of 2  9/10/13  03/11
	APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _	27 West	TR PI	n Needles	then Rt Oak try	Cial
					-
					-
			<u>, , , , , , , , , , , , , , , , , , , </u>		
					-
If permits are granted I agree to conform to all ordinances and laws of the I hereby state that foregoing statements are accurate and correct to the I	e State of North Ca best of my knowled	arolina regulating ige. Permit subj	g such work and ect to revocation	the specifications of plans si if false information is provide	ubmitted. ed.
Signature of Owner or Owner's Agen	t	8-2	9-17 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

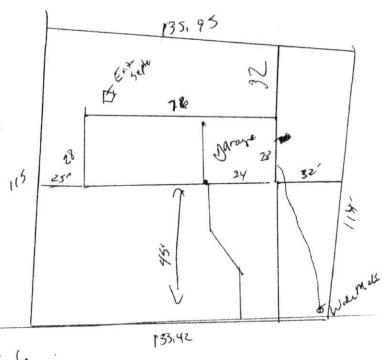
DISTRICT RAZOR USE

#BEDROOMS 3

8-30-12

Date

Zoning Administrator



Oak top Circle

1"= 40'

Ru Meed to