

4-28-14

Initial Application Date: 4-28-14

Application # 1450033336R
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: Curtis Holcomb Mailing Address: 526 McDuffie Rd.

City: Cameron State: NC Zip: 28326 Contact No: 919-499-0802 Email: _____

APPLICANT: Kristi Wilkie Mailing Address: 1921 Keller Andrews Rd.

City: Sanford State: NC Zip: 27330 Contact No: 919-774-1125 Email: Kristi.wilkie@claytonhomes.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Kristi Wilkie Phone # 919-774-1125

PROPERTY LOCATION: Subdivision: Hopper? Arrow Lot #: 12 Lot Size: 2.32 acres

State Road # _____ State Road Name: McDuffie Rd. Map Book & Page: GFS

Parcel: 09 9564 0124 PIN: 9564-80-8492

Zoning: R200 Flood Zone: X Watershed: NA Deed Book & Page: 02620/0555 Power Company*: _____

*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 32 x 76) # Bedrooms 4 # Baths 3 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 _____ x _____) 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: proposed mod Manufactured Homes: 1 ext sumt Other (specify): _____

Required Residential Property Line Setbacks:

Front	Minimum	Actual
		<u>325</u>
Rear		<u>150 133</u>
Closest Side		<u>30 72</u>
Sidestreet/corner lot		
Nearest Building on same lot		<u>250</u>

Comments:

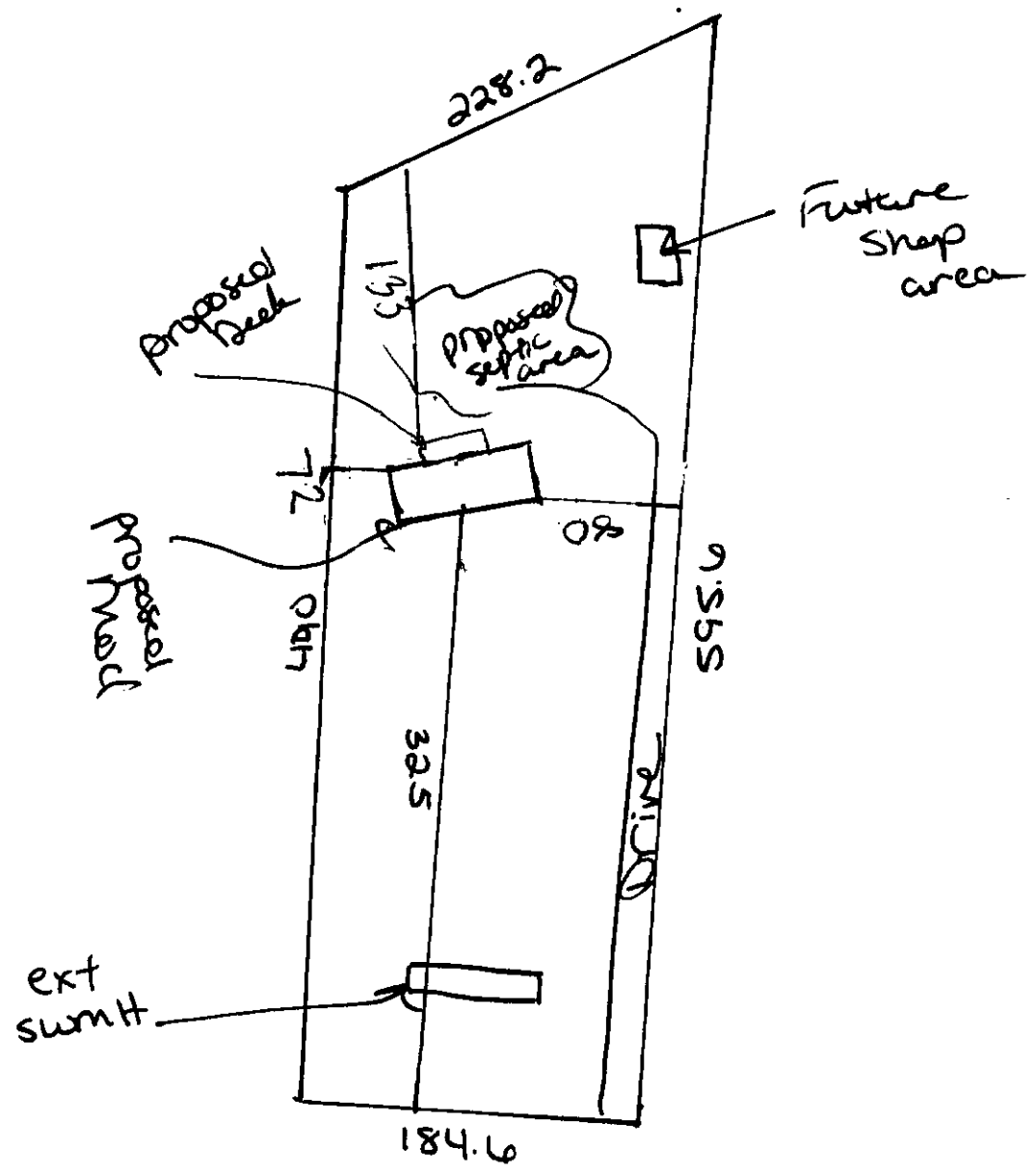
4-28-14 curts called and Chg side + rear setbacks

SCANNED

DATE _____

R

1=100



SITE PLAN APPROVAL
 DISTRICT BA20R USE Mod
 #BEDROOMS 4
 Date 4-3-14
 Zoning Administrator [Signature]

[Signature]