Initial Application Date: 5/10/01

Application

11-50001982

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793
LANDOWNER: ANDRASON CREEK GOLF CLUB, LLC Mailing Address: 3831 NURSERY ROAD
City: SPRING LAKE State: NC Zip: 28390 Phone #: 910-814-2613
APPLICANT: BURR JOHNSON City: SPRING LAKE State: NC Zip: 28370 Phone #: 910-814-2613
PROPERTY LOCATION: SR #: 1117 SR Name: Ray Rd (Nursery Rd.) Parcel: 01-0535-0100 PIN: 0505-86-8897 Zoning: RAZOR Subdivision: Ovudorson Orlox. Solf College Lot #: Lot Size: 1462.4 Flood Plain: X Panel: 150 Watershed: N/A Deed Book/Page: 0827-048 Plat Book/Page: Trax Ma
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Huy 210 SOUTH TO RAY RO RICHT ON RAY ROAD APPROX 4-5 miles To Amorrow Creek Golf Caus on The Picht.
PROPOSED USE:
□ Sg. Family Dwelling (Sizex) # of Bedrooms # Baths Basement (w/wo bath) Garage Deck
☐ Multi-Family Dwelling No. Units No. Bedrooms/Unit
☐ Manufactured Home (Size x) # of Bedrooms Garage Deck
Comments:
□ Number of persons per household
☐ Business Sq. Ft. Retail Space Type
□ Industry Sq. Ft Type
☐ Home Occupation (Size x) # Rooms Use
Accessory Building (Size x) Use
□ Addition to Existing Building (Size x) Use 15 × 40 ca. Half-vay house
other men 3 women public Bouthroom on Front 3 Book 9
Water Supply: () County () Well (No. dwellings) () Other
Sewage Supply: New Septic Tank () Existing Septic Tank () County Sewer () Other
Erosion & Sedimentation Control Plan Required? YES (NO)
Structures on this tract of land: Single family dwellings Manufactured homes Other (specify) HAIT way Houses
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? YES (NO)
Required Property Line Setbacks: Minimum Actual Minimum Actual
Front 35 1000+ Rear 25 100+
Side 2510 1000+ Corner 20
Nearest Building 10 1000

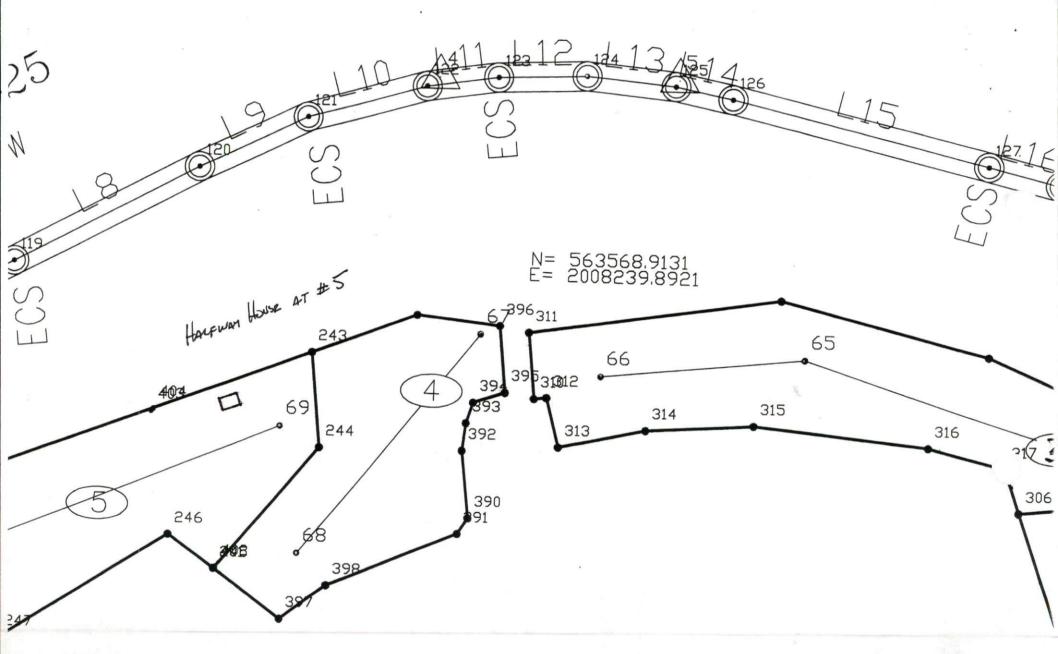
If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications or plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Signature of Applicant

Date

**This application expires 6 months from the date issued if no permits have been issued **





TRACT 5

