

Initial Application Date: 12/29/04

Application # 450011003
813329

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793

LANDOWNER: Woodshire Partners LLC
CAVINESS LAND DEV Mailing Address: 2818 RAFFORD ROAD, STE 300
City: FAYETTEVILLE State: NC Zip: 28303 Phone #: 481-0503

APPLICANT: CAVINESS LAND DEV
SAME AS ABOVE Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: 1117 SR Name: NURSERY ROAD
Parcel: DL 05310 0038 DL (parent parcel) PIN: _____
Zoning: RAZOR Subdivision: WOODSHIRE Lot #: 93 Lot Size: .35
Flood Plain: X Parcel: 155 Watershed: n/a Deed Book/Page: OTF Plat Book/Page: _____

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 27 TO NURSERY RD, WOODSHIRE
SUBDIVISION WILL BE ON THE LEFT. turn left on Woodshire Dr.
turn left on SILVER OAKS. turn right on Union Circle

PROPOSED USE:
 Sg. Family Dwelling (Size 50 x 60⁶⁴) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) _____ Garage Deck
 Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
 Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____
Comments: Included in total size

Number of persons per household SPAC
 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 _____
 Other _____

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 1 Manufactured homes _____ Other (specify) _____
roperty 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	<u>35</u>	<u>36'</u>	Rear	<u>25</u>	<u>50'</u>
Side	<u>10</u>	<u>19'</u>	Corner	<u>-</u>	<u>-</u>
Nearest Building	<u>10</u>	<u>7</u>			

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]
Signature of Owner or Owner's Agent

12-8-04
Date

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

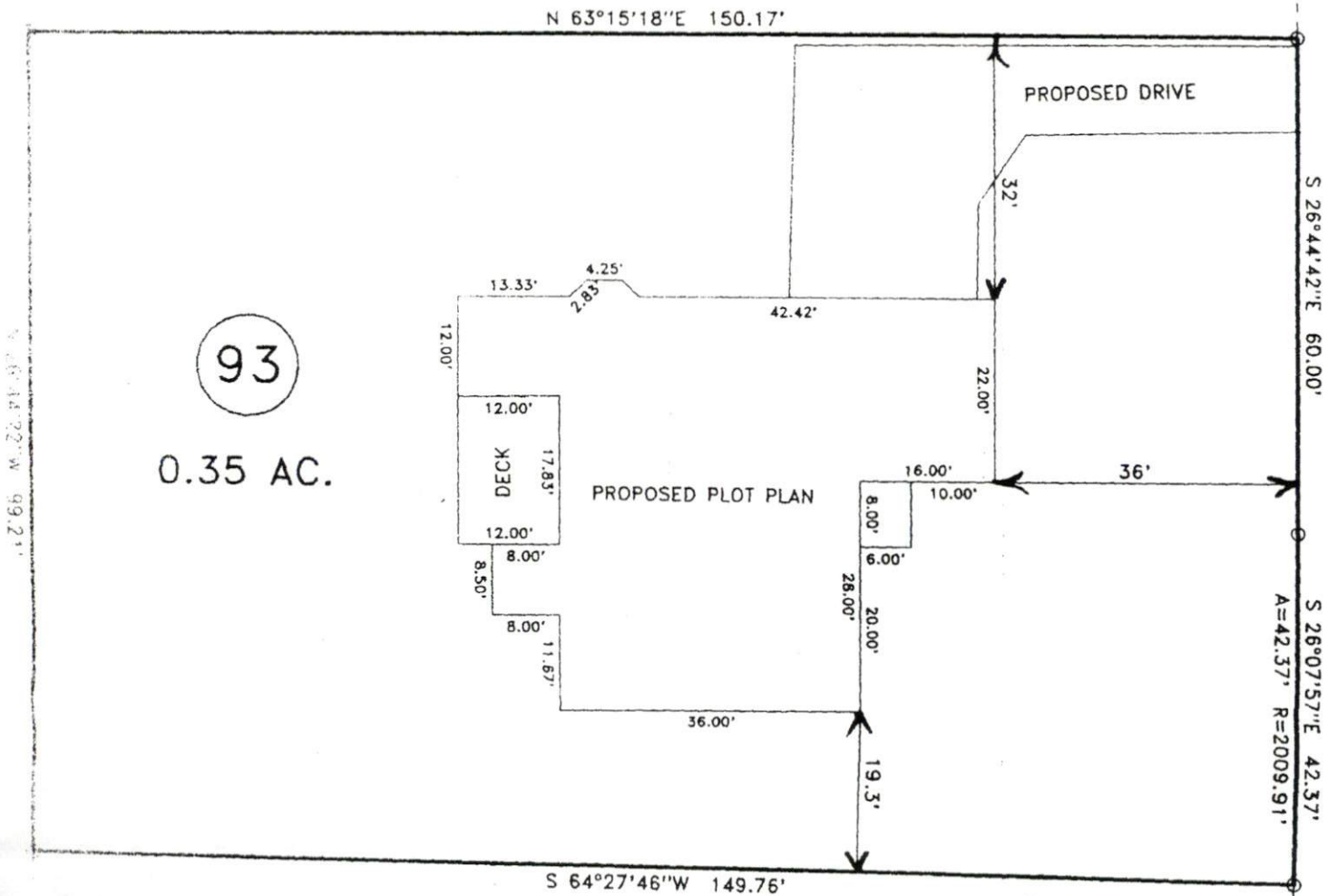
A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE PERMIT

1/4 S

#BEDROOMS 3
 DISTRICT REAR USE SFD
 SITE PLAN APPROVAL **92**
 Date September 2, 2009
 Zoning Administrator [Signature]

100=1

"UNION CIRCLE" 50' R/W



93

0.35 AC.

S 63°14'22" W 99.21'