412105
Initia' Application Date: 2-22-0. 11 Oak City Application 05-500/2659R
DY MANUEL Saw Ooth County OF HARNETT LAND USE APPLICATION 1012914 PM
dentral Permitting 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793
City: Fayetteville State: NC zip: 28303 Phone #: 910-486-4864
APPLICANT: Htt Constructors, Inc. Mailing Address: 2929 Breezewood Ave. Ste. 2 City: Fayetteville State: NC Zip: 28303 Phone #: 910-486-4864
PROPERTY LOCATION: SR #: 1/25 SR Name: Lemile Black Rd.  Parcel: 0 1 0536 02 0008 (04 PIN: 0514-04-2109)
Zoning: RAZOR Subdivision: Forest Oaks Lot #: 64 Lot Size: 0.52 AC
Flood Plain: Panel: 0155 Watershed: Deed Book/Page: 2100/390Plat Book/Page: Map 2005 401
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Huy 2,7W, to Nursery Rd. (SCIII). Turn Left on
into Forest Oaks Subdivision.
PROPOSED USE: 53 48 3 2 / 2  Sg. Family Dwelling (Size 45 : 65 # of Bedrooms 8 # Baths 8 Basement (w/wo bath) NO Garage DBL Deck US
Multi-Family Dwelling No. Units No. Bedrooms/Unit
Manufactured Home (Size x ) # of Bedrooms Garage Deck
Comments:
Number of persons per household Spec.  Business Sq. Ft. Retail Space Type
Addition to Existing Building (Sizex) Use
Water Supply: ( County ( ) Well (No. dwellings ) ( ) Other
100000
Property awar of this treat of land are land to a land a land to a land and for (500) St. Alice Land St. Alice
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  Required Property Line Setbacks:  Minimum  Actual  Minimum  Actual
Required Property Line Setbacks: Minimum Actual Minimum Actual
Front 35 00 Rear 30 75,301
Side 10' 26.6,30' corner 30'
Nearest Building
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.
THENSIGOD TO THE STORY
1). Kalph Hull Till 7.19.05 Per EHlaim,
Signature of Applicant Date
/ VMD /

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

