SCANNE	
Initial Application Date: 8-14-85 Q-15-0	$\frac{8}{\text{Application } \# $
3018810	
COUNTY OF HARNE	TT LAND USE APPLICATION ne: (910) 893-7525
	ailing Address: 465 Lowrence Rd.
City: Birnadway State: NC Zip: 27505	Home #: 9/9-906-4069 Contact #: 9/9-906-4069
APPLICANT*: SomeM	ailing Address:
City:State:Zip:	Home #:Contact #:
*Please fill out applicant information if different than landowner	0.
PROPERTY LOCATION: State Road #: 1272 State Road Name:	Lawrence Kdi
Parcel: 13-9691-6128-92	n: 9691-48-6636, 000
Koning: 13 30 Subdivision: Elsil Bullange	Lot #: Lot Size: 8,6/
Flood Plain: Panel: Watershed: W	Deed Book/Page: 1232/342 Plat Book/Page: FT L+#2
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
421 North, Turn Right on Holly Sp	rings Church Rd. Turn left on
Hallies Pines, Turn left on	laurence site on right
- Mailles III I I I VIA TELL ON	ownere street street
1. Company of the com	
PROPOSED USE:	Circle:
- 1.12th	w/wo bath) Garage Deck Crawl Space Slab
Modular:On frameOff frame (Sizex) # Bedrooms	# Baths Garage(site built?) Deck(site built?)
Multi-Family Dwelling No. Units No. Bedrooms/U	
	# Bedrooms Garage(site built?) Deck(site built?)
	# Employees:Hours of Operation:
	# Employees:Hours of Operation:
Church Seating Capacity # Bathrooms	
	UseHours of Operation:
Addition to Evicting Building (Size x) Lies	
Addition to Existing building (Sizex) Ose	Closets in addition()yes ()no) Other
**Mater Supply: (County () Well (No. dwellings) (Sewage Supply: (New Septic Tank (Need to fill out New Tank Checklis	
Fraperty owner of this tract of land own land that contains a manufactured h	
	Ifactured Homes Other (specify)
Reguired Residential Property Line Setbacks: t Comments	
449 June Day	(c) - a a a a
Millimum SS Actual 11	sino aclaine second home
$\frac{25}{25} \qquad \frac{75.3}{45.5}$	K75 L Ke3#00 8 50020970
ide <u>10</u> 275,2 109	
corner/Sidestreet 20	
earest Building 10 51 01	
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 of plan
mbmitted. I hereby state that the foregoing statements are accurate and	d correct to the best of my knowledge. This permit is subject to revocation if fals
formation is provided on this form.	
MA ARTILO	8-14-08
. Hard 11 (8) (//11/12)	0 - 1 - 1 - 0

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

ignature of Owner or Owner's Agent

Sign of People (18) A Florida People (18) A

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Date

