

Initial Application Date: 6/29/10 7/20/10 **SCANNED** 6/30/10 7/20/10 DATE Application # 10-500-24734 RR CU# \_\_\_\_\_

**COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION**  
 Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Pyron Construction Mailing Address: 2550 Capital DR. Suite 105

City: Creedmoor State: NC Zip: 27522 Contact # 919-539-2077 Email: \_\_\_\_\_

APPLICANT\*: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact # \_\_\_\_\_ Email: \_\_\_\_\_  
 \*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Wade Hare Phone # 919-539-2077

PROPERTY LOCATION: Subdivision: Cameron Pines Lot #: 19 Lot Size: \_\_\_\_\_

State Road # 1115 State Road Name: Buffalo Lake Rd. Map Book & Page: B3010 P648

Parcel: 038586 0024 57 PIN: 9587-53-6637.000

Zoning: RAZOR Flood Zone: X Watershed: N/A Deed Book & Page: 2738 164 Power Company\*: Central Electric

\*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 27 West About 11 miles Turn Left on Buffalo Lake Rd. Subdivision 1/4 mile on Left

**PROPOSED USE:**

SFD: (Size 60 x 60) # Bedrooms: 3 # Baths: 3 Basement (w/wo bath): \_\_\_\_\_ Garage:  Deck:  Crawl Space:  Slab: \_\_\_\_\_  
 (Is the bonus room finished? ( ) yes ( ) no w/ a closet? ( ) yes ( ) no (if yes add in with # bedrooms)

Mod: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ 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

Structures (existing or proposed): Single family dwellings: 1 Prop Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks: 31.28 Comments: No FEE REVISION PER E-HEALTH PD

Front Minimum 35 Actual 27.97

Rear 25 84.17 84.73 CHANGED ACTUALS TO MATCH

Closest Side 10 25.20

Sidestreet/corner lot 20

Nearest Building on same lot 6

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Wade Hare  
 Signature of Owner or Owner's Agent

6/28/10  
 Date

\*\*This application expires 6 months from the initial date if permits have not been issued\*\*  
 A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION