

Initial Application Date: 8-5-10
1-19-12

SCANNED
8-5-10
DATE

Application # 1050024980A
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: Stonecross, LLC Mailing Address: 125 Whispering Pines Drive

City: Spring Lake State: NC Zip: 28390 Contact # 910-814-2633 Email: jbmangum@andersoncreekclu

APPLICANT*: Roman Coblenz Mailing Address: 29 Gordon Lane

City: Spring Lake State: NC Zip: 28390 Contact # 252-893-7540 Email: Coblenz_roman@yahoo.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Bret Mangum Phone # 919-422-4714

PROPERTY LOCATION: Subdivision: Stonecross Lot #: 31 Lot Size: 18,464 sf

State Road # 1120 State Road Name: Stonecross Drive (Overhills Rd) Map Book&Page: 2010 / 507

Parcel: 01 0535 14 0100 04 PIN: 0515-30-0055-000

Zoning: RA-20 B Flood Zone: X Watershed: WA Deed Book&Page: 2726, 300 Power Company*: SREMC

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 South right on Ray rd right on Overhills rd left on Stonecross dr right on Cobblestone dr lot 31 on left

PROPOSED USE: 78x44

- SFD: (Size 40' x 50') # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: Deck: _____ Crawl Space: Slab: _____ 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 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Comments: attached is septic design by Hal Owen

Front Minimum 35 Actual 38

Rear 25 25-19

Closest Side 10 15

Sidestreet/corner lot _____

Nearest Building on same lot _____

1-19-12 - Revision - changed home size
Ref # 0650014020
file was closed - lawness land could not get a septic on lot.
lot has a new map 2010-507.

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.

Bret Mangum
Signature of Owner or Owner's Agent

8/4/10
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

11050

Revision
SITE PLAN APPROVAL

DISTRICT _____ USE SFD
 2 BEDROOMS 3
1-19-12
 Zoning Administrator QAB

