1211	SCANNED SIST	-
Initial Application Date 24 April 2011	DAYE	oplication # 11500 26514 R
7 7 11	HARNETT RESIDENTIAL LAND USE APP C 27546 Phone (910) 893 7525 ext 2	CU# LICATION Fax (910) 893 2793 www harnett org/permits
A A A RECORDED SURVEY MAP RECORDED DEED (OR OF	FER TO PURCHASE) & SITE PLAN ARE REQUIRE	ED WHEN SUBMITTING A LAND USE APPLICATION
	S LLC Mailing Address PO B	
City Hope MUS state NC Zip	38348 Contact No 329-0032	Email NallSONC Tr com
and REBERNE CREST VIEW DEVELOPMENT LLG	Mailing Address PO Box 727	
City State NC Zip State NC Zip *Please fill out applicant information if different than landowner	2834/ Contact No	Email
CONTACT NAME APPLYING IN OFFICE	L NALLS	Phone #
PROPERTY LOCATION Subdivision	Seasons	Lot # _//Lot Size, 44ACNE
State Road # 1570 State Road Name	NACISON TRAIL	Map Book & Page 2009 439
Parcel 9567 93 0006	/	$\frac{-731600}{}$
Zoning <u>R # 29</u> Elood Zone Watershed <u>W</u>	Deed Book & Page OT / /	PowerCompany <u>(aNTA WICTU</u> C (i
New structures with Progress Energy as service provider ne	ed to supply premise number	from Progress Energy
PROPOSED USE SFD (Size ** ** ** ** ** ** ** ** ** ** ** ** **		Monolithic
SFD (Size *** x ***) # Bedrooms ** 7 * Baths ** 50 × 49 (Is the bonus room finished? (_	Basement(w/wo bath) Garage t) no (if yes add in with # bedrooms)
Mod (Sizex) # Bedrooms # Baths	Basement (w/wo bath) Garage \$) yes () no Any other site built addit	
(is the second hoor missied , (
☐ Manufactured HomeSWDWTW (Size	x) # Bedrooms Garage _	(site built?) Deck(site built?)
□ Duplex (Sizex) No Buildings	No Bedrooms Per Unit	
☐ Home Occupation # Rooms Use	Hours of Operation	#Employees
☐ Addition/Accessory/Other (Sizex) Use		Closets in addition? () yes () no
Water Supply County Existing Well N	New Well (# of dwellings using well) *Must have operable water before final
Sewage Supply New Septic Tank (Complete Checklis		
Does owner of this tract of land own land that contains a mai		
Does the property contain any easements whether undergrou		
Structures (existing or proposed) Single family dwellings		Other (specify)
	1/2/11 C =	
Required Residential Property Line Setbacks		EN CHANGED FROM MOND
Front Minimum Sh Actual 16	7 7 11 P MI	or flaviated for 1745 CHARLE
Rear	1-1-11 KW UN	Wy for Viner
Closest Side		
Sidestreet/corner lot		
Nearest Buildingon same lot		02/44

Residential Land Use Application

SPECIFIC DIRECTIONS TO THI	E PROPERTY FR	OM LILLINGTON	nu Hon	v Welch	ROBA	to	
Pundersoa	,	Rond to	Left	an Seas	sows 31	ave	
						With the second	
				· ••••			
permits are granted I agree to	conform to all ordu	nances and laws of the	State of North Ca	arolina regulating su	ch work and the s	pecifications of plan	s submitted
hereby state that foregoing state	ements are accura	ite and correct to the be	est of my knowled	ge Permit subject t	o revocation if fals	se information is pro	vided
	Signature of Owi	ner or Owner's Agent			14 1 20 11		

^{***}It is the owner/applicants responsibility to provide the county with any applicable information about the subject property including but not limited to boundary information house location underground or overhead easements etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications ***

^{*} This application expires 6 months from the initial date if permits have not been issued**

