

Initial Application Date: 9-15-14
10-1-14

Application # 145034599A
CU# _____



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

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Sara Crawford Coker Mailing Address: 138 Homestead Lane
City: Argyle State: NC Zip: 27501 Contact No: _____ Email: _____

APPLICANT: Joseph McKennies Mailing Address: 11500 Holly Springs New Hill Rd
City: APEX State: NC Zip: 27389 Contact No: 919-889-9459 Email: Sjmc kennies@nc.rr.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Joseph McKennies @ Sabrina Jhusin Phone # 919-889-9459

PROPERTY LOCATION: Subdivision: The Homestead Lot #: 81 Lot Size: 2.96
State Road # 1532 State Road Name: Oak Grove Church Rd Map Book & Page: 166 128-B
Parcel: 04 0682 05-07 PIN: 0682 61 1128.00
Zoning: R140 Flood Zone: X Watershed: IV Deed Book & Page: 071 Power Company*: _____

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

PROPOSED USE:

- SFD: (Size 60 x 56) # Bedrooms: 4 # Baths: 2 1/2 Basement(w/wo bath): 1 Garage: 2 Deck: 1 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

Does the property contain any easements whether underground or overhead () yes no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks: Comments: 10-1-14 Moved SFP Per FH 701

	Minimum	Actual	
Front	<u>35</u>	<u>110</u>	<u>95</u>
Rear	<u>25</u>	<u>280</u>	<u>295</u>
Closest Side	<u>10</u>	<u>113</u>	<u>90</u>
Sidestreet/corner lot	_____	_____	_____
Nearest Building on same lot	_____	_____	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Farm Lillington go back to Hwy 210
toward Aringer Nc turn right onto Hwy 55 make a right onto
Oak Church Road - The Subdivision is on the left (The Homestead)
the lot is 2nd lot on the right. Look for Century 21 sign.
138 Home Stead.

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.

Debra Johnson Joseph McK 09/15/2014
Signature of Owner or Owner's Agent Date

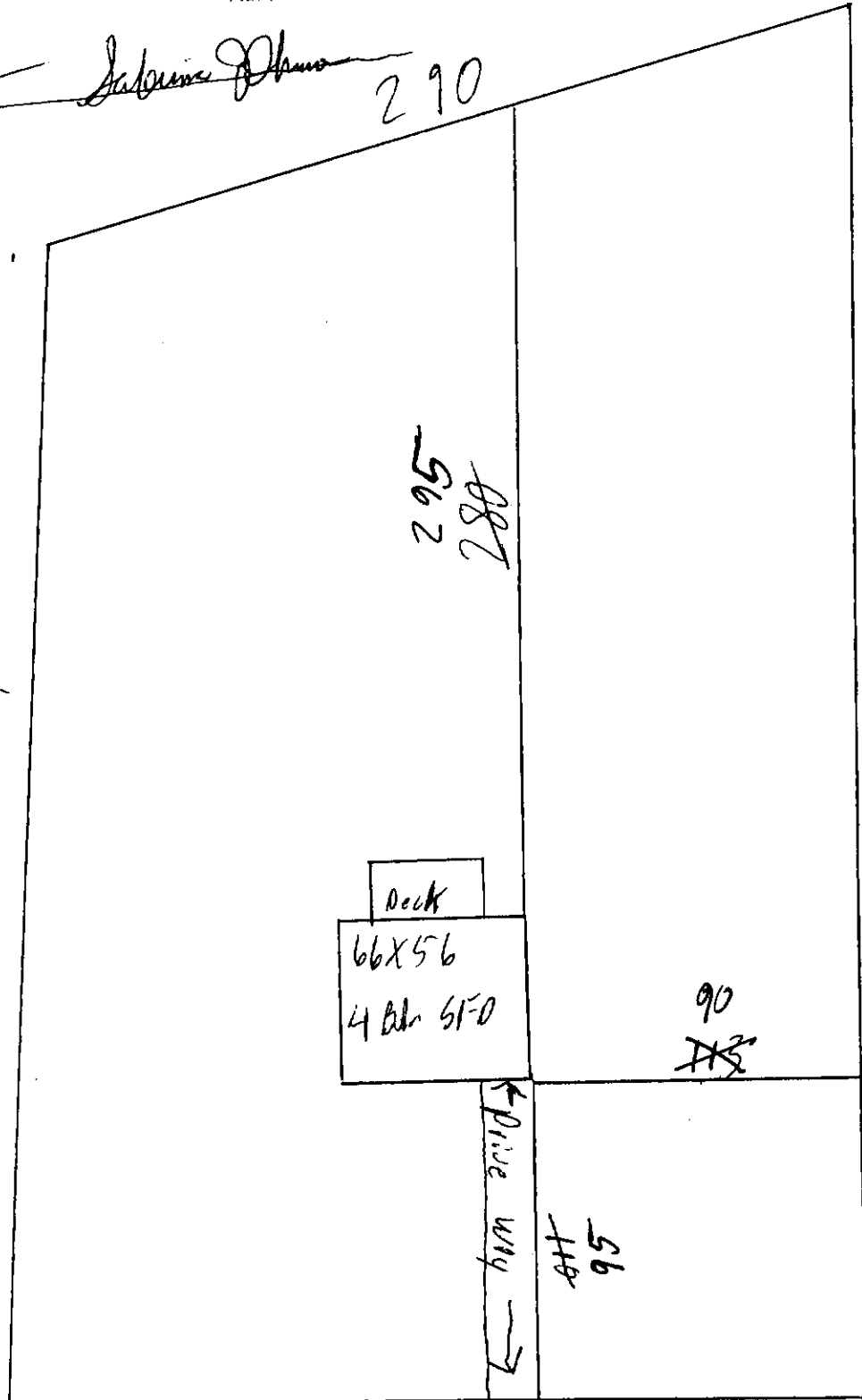
It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or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

This application expires 6 months from the initial date if permits have not been issued

I = 60

SITE PLAN APPROVAL
DISTRICT RA 40 USE SFD
#BEDROOMS 4
9-15-14 J. E. [Signature]
Date Zoning Administrator

[Signature] [Signature]



407

290

295
288

485

Deck
66x56
4 Bdr SFD

90
~~113~~

Driveway
56
~~95~~

300

← Homestead Lane →