| Initial Application Date: 4-15-15 |
|--|
| 7015 (MINITEDICATION # 100055902) |
| Central Permitting County of Harnett Residence (910) 893-7525 ext: 2 Fax: (910) 893-2793 www.hamett.org/permits |
| "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLANAGE REQUIRED MALES GIVE PLANAGE PLANAGE REQUIRED MALES GIVE PLANAGE PL |
| LANDOWNER: DIVERSIFED INVESTIGATION OF COMMENTS |
| City: Jacksonville State: NC Zip: 28540 Contact No: 910-346-9800 Email: hetty be supplied to |
| APPLICANT ATTOUT CONTO TO THE |
| APPLICANT ATLANTIC CONSTRUCTION INC. Mailing Address: 7 DORIS AVE. F. |
| City: Tacksonv. 1/2 State: NC Zip: 28540 Contact No: 910-938-9053 Email: acidentantic constantinum version of different than landowner |
| CONTACT NAME APPLYING IN OFFICE: John Schramm Phone # 910 - 459 - 2561 |
| PROPERTY LOCATION: Subdivision 5 |
| PROPERTY LOCATION: Subdivision: Sweet water State Road # 2044 State Road Name: Will Grant Cl |
| |
| DIN. ACULT 21 COLLAR |
| Zoning: RA-20RFlood Zone: Watershed: Deed Book & Page: 02363 / 0941 Power Company*: South River Electric *New structures with Progress Energy as service provides pr |
| *New structures with Progress Energy as service provider need to supply premise numberfrom Progress Energy. |
| PROPOSED USE: |
| SFD: (Size 45 x41.6) # Bedrooms: 3 # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: Slab: Slab: Deck: Slab: Slab |
| (Is the bonus room finished? (***) yes () no w/ a closet? () yes () no (if yes add in with # bedrooms) |
| ☐ Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?) |
| Duplex: (Sizex) No. Buildings:No. Bedrooms Per Unit: |
| Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees: |
| □ Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () no |
| Water Supply: Y County Svictics Wall |
| Water Supply: County Existing Well New Well (# of dwellings using well) *Must have operable water before final Sewage Supply: New Septic Tank (Complete Chartein) |
| Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Fank (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: |
| Actual Se |
| Rear (01.44 |
| Closest Side 21.36 |
| Sidestreet/corner lot |
| Nearest Building |

on same lot

| SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: South on 40/ |
|--|
| Turn Right on lo W. Reeves Bail |
| Will Lucas Da |
| Tunn Left ONTO HYBRID LW |
| Turn Right ONTO RAIN MAKER ST |
| THEN RIGHT ON Second CT DINTO HARVEST CT |
| 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. 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**



