

Initial Application Date: 7-18-2001

Application # 01-50002571

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: C.A. Maxwell Const. Mailing Address: 4104 Bent Cross Dr.
City: Fayetteville State: N.C. Zip: 28301 Phone #: 910-678-8635

APPLICANT: Carman Maxwell II Mailing Address: Same
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: 1170 SR Name: Stone Cross Overhill Rd
Parcel: 01-0535-01-0100-92 PIN: 0515.03-30-43284536
Zoning: Residential Subdivision: Stone Cross Lot #: 24 Lot Size: 5 Ac
Flood Plain: XNA Panel: 0165 Watershed: NA Deed Book/Page: MAP 99-84B Plat Book/Page: OTP

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take Hwy 210 Towards Spring Lake.
Turn onto Overhills ROAD To Stone Cross. Lot on Left
lot 24

PROPOSED USE:

- Sg. Family Dwelling (Size 54 x 32) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) NO Garage yes Deck NO
included
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____
- Comments: _____
- Number of persons per household _____
- Business Sq. Ft. Retail Space _____ Type _____
- Industry Sq. Ft. _____ Type _____
- Home Occupation (Size _____ x _____) # Rooms _____ Use _____
- Accessory Building (Size _____ x _____) Use _____
- Addition to Existing Building (Size _____ x _____) Use _____
- Other _____

Water Supply: County Well (No. dwellings _____) Other

Sewage Supply: New Septic Tank Existing Septic Tank County Sewer Other

Erosion & Sedimentation Control Plan Required? YES NO

Structures on this tract of land: Single family dwellings 1 prop Manufactured homes _____ Other (specify) _____

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? YES NO

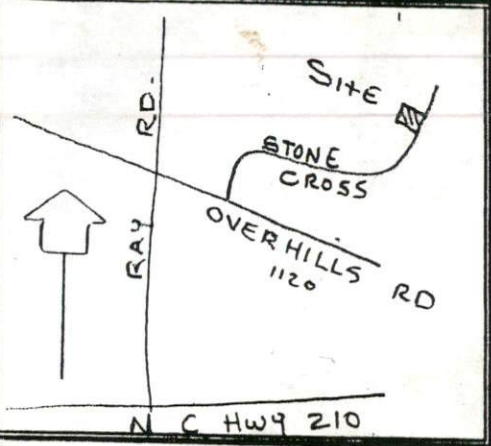
Required Property Line Setbacks:	Minimum		Actual	
	Minimum	Actual	Minimum	Actual
Front	<u>35</u>	<u>35</u>	Rear	<u>25</u>
Side	<u>10</u>	<u>23</u>	Corner	<u>20</u>
Nearest Building	<u>10</u>	<u>n/a</u>		<u>n/a</u>

If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications or plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Carman A. Maxwell
Signature of Applicant

7-18-2001
Date 7-19-01 #2591

This application expires 6 months from the date issued if no permits have been issued



CANAL LAND COMPANY
DB 620 PG 197

MAP # 99-843
1929

VICINITY MAP - N.T.S.

MAP # 99 - 843
STONE CROSS
PH. ONE

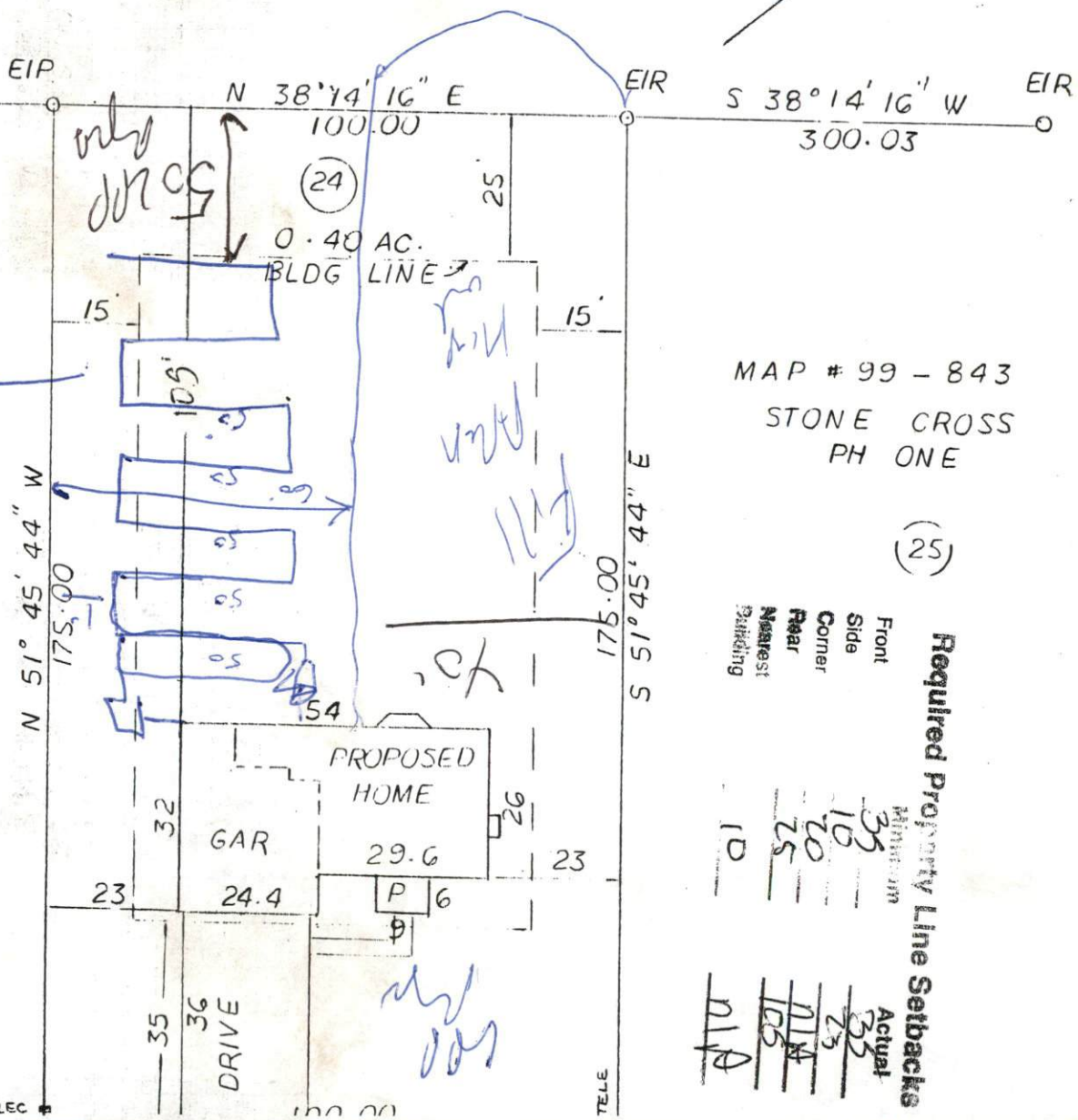
MAP # 99 - 843
STONE CROSS
PH ONE

SITE PLAN APPROVAL

DISTRICT RA-ZOM USE SFD

#BEDROOMS 3

Date 17 Dec 01 Andia Bell
Zoning Administrator



Required Property Line Setbacks

Minimum	Actual
Front	35
Side	10
Corner	20
Rear	25
Nearest Building	10

TIE LINE
106.46

SIR

ELEC

TELE

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sol

0.27 Fill
TRASH
holes