

Initial Application Date: 7-18-2001

Application # 01-50002572

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 Constr. Mailing Address: 4104 Bent Grass Dr.
City: Fayetteville, State: NC Zip: 28301 Phone #: 910-678-8635

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

PROPERTY LOCATION: SR #: 1120 SR Name: Stone Cross Overhills RD
Parcel: 01-0535-01-0100-93 PIN: 0515.03-20-4486
Zoning: Res. RA 20M Subdivision: Stone Cross Lot #: 25 Lot Size: 1/2 AC
Flood Plain: XNA Panel: 0165 Watershed: HA Deed Book/Page: OTP Plat Book/Page: 99-84-A

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 to Overhills RD to Stone Cross subd. Lot 25

PROPOSED USE:

- Sg. Family Dwelling (Size 50x60.5) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) NA Garage yes Deck NA
- 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
Front	<u>35</u>	<u>35</u>	Rear	<u>77</u>
Side	<u>10</u>	<u>25</u>	Corner	<u>NA</u>
Nearest Building	<u>10</u>	<u>NA</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 Maxwell
Signature of Applicant

7-18-2001
Date

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

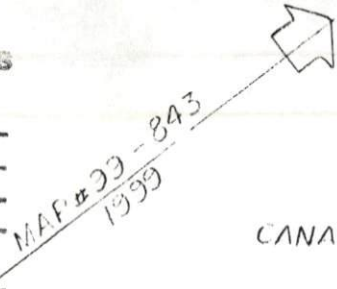
A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE PERMIT



VICINITY MAP - N.T.S.

Required Pr... Setbacks

	Required	Actual
Front	35	35
Side	10	25'
Corner	25	N/A
Rear	25	47'
Nearest Building	10	N/A



CANAL LAND COMPANY
DB 620 PG197

MAP # 99 - 843
STONE CROSS
PH ONE

MAP # 99 - 843
STONE CROSS
PH ONE

SITE PLAN APPROVAL
DISTRICT RA-ZOM USE SFP
#BEDROOMS 3
17 Jul 01
Date Carole J. Bell
Zoning Administrator

TIE LINES

100.00
N 38°14'16" E

