

Initial Application Date: 3/31/02

NEW

Appl # 02-5103878

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793

LANDOWNER: Upriver Development Mailing Address: P.O. 53786
City: Fayetteville State: NC Zip: 28305 Phone #: 630-2102

APPLICANT: SAME AS ABOVE Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: 1141 SR Name: Alpine Dr
Parcel: 03-9587-03-0020-32 PIN: 9596-08-6296136
Zoning: RA-20R Subdivision: Sunset Ridge Lot #: 30 Lot Size: .43
Flood Plain: X Panel: 0150-D Watershed: N/A Deed Book/Page: OTP Plat Book/Page: Plat 15-A

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Alpine to Northwest Dr. lot on left.
77 Northwest Dr.

PROPOSED USE:

Sg. Family Dwelling (Size 35 x 42 # of Bedrooms 3 # Baths 2 Basement (w/wo bath) N/A Garage double Deck 10x12 wood
 Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
 Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____

Comments: _____
 Number of persons per household 3
 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 Manufactured homes N/A 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>40</u>	Rear	<u>75</u>
Side	<u>10</u>	<u>30</u>	Corner	<u>20</u>
Nearest Building	<u>10</u>	<u>—</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.

Signature of Applicant: [Signature] Date: 1/29/02
215
296

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

Required Property Line Setbacks

	Minimum	Actual
Front	35	40
Side	10	30
Corner	20	25
Rear	25	25
Nearest Building	10	10

(29)

SITE PLAN APPROVAL

DISTRICT RA-ZOR USE SFD

#BEDROOMS 3

Date 3/20/22 CBell
Zoning Administrator

