| Initial Application Date: | 10/7/02 |
|---------------------------|---------|
|                           | / /.    |

Application # 03-50005665

## CC Y OF HARNETT LAND USE APPLICATION

| Central Permit | tting |
|----------------|-------|
|----------------|-------|

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2702

| LANDOWNER: BALLARD WOODS LLC Mailing Address: PO BOX 6127  City: RALPIGH  State: N/C 7::: 27/22  |    |
|--|----|
| APPLICANT: BALLARD WOODS LLC Mailing Address:  |    |
| Phone #:  State: Zip: Phone #:  Phone #:   | _  |
| Parcel: 08-0651-0392  PIN: 0651-39-7888  Zoning: 1430  Subdivision: BAUARD WOODS   | _  |
| Plat Book/Page: Plat Book/Page | 2  |
| RT, ON JOSEPH ALEXANDER  | -  |
| PROPOSED USE:  |    |
| Sg. Family Dwelling (Size 60 x 60) # of Bedrooms # Baths 2 5 Basement (w/wo bath) Garage Dwelling No. Units No. Bedrooms/Unit_   |    |
| Multi-Family Dwelling No. Units No. Bedrooms/Unit Basement (w/wo bath) Garage Dwelling No. Units No. Bedrooms/Unit   | ed |
| Manufactured Home (Size x ) # of Bedrooms Garage Deck  |    |
| Number of persons per household  |    |
|  |    |
| Type   |    |
| Home Occupation (Size x ) 4P   |    |
| " Rooms Ilse   |    |
| Addition to Training Prints  |    |
| Other Use  |    |
| ater Supply: ( ) County ( ) Well (No. dwellings ( ) Other  |    |
| wage Supply: (, ) New Septic Took  |    |
| Sion & Sedimentation Control Plan Required? YES NO County Sewer Other  |    |
| uctures on this tract of land: Single family dwellings   |    |
| perty owner of this tract of land own land that contains a manufactured home win five hundred feet (500') of tract listed above?  YES NO   |    |
| quired Property Line Setbacks: Minimum Actual  |    |
| Front 35 45 Rear 25 190  |    |
| Side 13  |    |
| Comer ZE   |    |
| Nearest Building   |    |
| ermits 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  |    |
| by swear that the foregoing statements are accurate and correct to the best of my knowledge.   |    |
| J. 7.1.  |    |
| lature of Applicant  |    |
| Date   |    |

\*\*This application expires 6 months from the date issued if no permits have been issued \*\*  $\frac{1}{2}$ 

80010-15N



