| ( XYYC   | / N   |
|--|---|
| Initial Application Date: 335-U4   | Application # 4-50009071 R                                    |
| 100.   | INDUSE APPLICATION KUVOZIJE 12-8-CC                           |
| COUNTY OF HARNETT LA   | NO USE APPLICATION POOL COSTO                                 |
| Central Permitting 102 E. Front Street, Lillington, NC 275   | Hone: (910) 893-4759 Fax: (910) 893-2793                      |
| LANDOWNER: Confort Homes Fre   | Po 30x 3/9  |
| LANDOWNER: COMPONE HOMES THE   | ailing Address: (C.7507 )6(                                   |
| City: Clayton State: Ne  | Zip: 21)20 Phone #: (114) 333 3242                            |
| APPLICANT: Comfort Homes Inc. M  | Po 300 319  |
| City: Clayton State: Nic   |   |
| City: Claylon State: MC  | Zip: 273223 Phone #: (1777) 33.3 7242                         |
| PROPERTY LOCATION: SR #: 1412 SR Name: Chris   | to 11 1 Roll  |
| Parcel: 0806 4400/750  Parcel: 0806 4400/750  PIN: Zoning: RA-30 Subdivision: Forest Irails  Flood Plain: Y Panel: 010 Watershed: Panel: Panel | 17644 27 9050   |
| Janing PA-30 Subdivision Fax 857 /ag: 15   | 79 Lastin D. W. I.  |
| Fleed Plain: V Panels (2)(() Watershed   | Dead Park (Providence Control Mer                             |
| If located with a Watershed indicate the % of Imperious Surface:   | Plat Book/Page: Plat Book/Page: 17 33                         |
| DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 Word   | 4 lost a child 14781  |
| P. LT Kinghan K. Cinda R. L.   | 1) 11 + Colon Cight 161.                                      |
| Right on Kingsbruck Circle, Righton  | Coxigon Circle  |
|  |   |
| PROPOSED USE:  |   |
| Sg. Family Dwelling (Size 32 x 28) # of Bedrooms 3 # Baths 25  | Bosoment (m/ma hath) Comma \$28 \$17 p. 1770 a 3              |
| Multi-Family Dwelling No. Units No. Bedrooms/Unit  |   |
| Manufactured Home (Size x ) # of Bedrooms Garage   |   |
|  | Deck  |
| Comments:  Number of persons per household Spec.   |   |
|  | T   |
|  | Туре  |
| ☐ Industry Sq. Ft  | Type  |
|  | Use   |
|  |   |
|  |   |
| Water Supply: (County (No. dwellings )   | ( ) Other   |
|  |   |
|  | nty Sewer (_) Other   |
|  |   |
|  | nes Other (specify)   |
| Property owner of this tract of land own land that contains a manufactured home w/in fiv   |   |
| Required Property Line Setbacks: Minimum Actual  | Minimum Actual  |
| Front 35 55.45   | Rear 25 +25 105   |
| Side 10 23.89 17   | Corner A 11/DLD   |
| 15   | - Lucati  |
| Nearest Building (O) 10/14   | Rear 25 725 1C5' Corner — — — — — — — — — — — — — — — — — — — |
| 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.   |   |
| o o o o o o o o o o o o o o o o o o o  |   |
| 00   |   |
| Dheine Baller  | 3-8-04  |
| Signature of Owner or Owner's Agent  | Date  |
|  | vale  |

\*\*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

(Old app. #)

(Contirmed over phone)

12/8 N 734

