

Initial Application Date: 4-22-04

Application 04-5-9308

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: Allied Investments
Business Land Development Mailing Address: 559 EXECUTIVE CTR, STE 101
City: FAYETTEVILLE State: NC Zip: 28305 Phone #: 481-0503

APPLICANT: Business Land Development
SAMS AS ABOVE Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: _____ SR Name: Alpine

Parcel: 03 9587 10 0020 34 PIN: 9586 89 2047

Zoning: RH20R Subdivision: SUMMIT Lot #: 74 Lot Size: .40 ACRES

Flood Plain: X Parcel: 0075 Watershed: N/A Deed Book/Page: OTP Plat Book/Page: 2003/973

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 27 TO ADD: BUFFALO LK Rd. LEFT
TO Alpine Rd. LEFT TO TIMBERLINE DR.

PROPOSED USE:

- Sg. Family Dwelling (Size 56 x 32) # of Bedrooms 3 # Baths 2 1/2 Basement (w/wo bath) _____ Garage Deck
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____

Comments: _____

- Number of persons per household SPEC
- 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 Proposed 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>36</u>	Rear	<u>25</u>
Side	<u>10</u>	<u>29</u>	Corner	<u>20</u>
Nearest Building	_____	_____		_____

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 Owner or Owner's Agent

Date 3-10-04

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

956 4/26 S

66

67

SITE PLAN APPROVAL SFD
 DISTRICT RADDER USE 3
 #BEDROOMS 3
422-04
 ZONING ADMINISTRATOR

75

74

