



Initial Application Date: 08/26/2022

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

LANDOWNER: William Respass Mailing Address: 36 Rock Ridge Pl
City: Coats State: NC Zip: 27521 Contact No: 919-673-0762 Email: scott103543@yahoo.com

APPLICANT*: Top Tier Solar Solutions Mailing Address: 1530 Center Park Drive
City: Charlotte State: NC Zip: 28217 Contact No: 855-997-1213 Email: accountmanager@toptiersolarsolutions.com

*Please fill out applicant information if different than landowner

ADDRESS: 36 Rock Ridge Pl, Coats, NC 27521 PIN: 0691-02-6346.000
Zoning: RES Flood: _____ Watershed: _____ Deed Book / Page: 4116:0007

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

- Monolithic
SFD: (Size ___x___) # Bedrooms: ___ # Baths: ___ Basement(w/wo bath): ___ Garage: ___ Deck: ___ Crawl Space: ___ Slab: ___ Slab: ___
TOTAL HTD SQ FT GARAGE SQ FT (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
Modular: (Size ___x___) # Bedrooms ___ # Baths ___ Basement (w/wo bath) ___ Garage: ___ Site Built Deck: ___ On Frame ___ Off Frame ___
TOTAL HTD SQ FT (Is the second floor finished? () yes () no Any other site built additions? () yes () no
Manufactured Home: ___SW ___DW ___TW (Size ___x___) # Bedrooms: ___ Garage: ___(site built? ___) Deck: ___(site built? ___)
Duplex: (Size ___x___) No. Buildings: _____ No. Bedrooms Per Unit: _____ TOTAL HTD SQ FT
Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
Addition/Accessory/Other: (Size ___x___) Use: _____ Closets in addition? () yes () no
TOTAL HTD SQ FT GARAGE

Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank _____ County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

Residential Rooftop Solar PV1

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): X

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent

08/30/2022 Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.
*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

strong roots • new growth