

Application #

\* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed contractor. Address, company name & phone must match Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

on on license.		
Owner's Name: JC S	Sicalphite	Date: 1011 100
Site Address 88 Flor	ontine of Agree MOS	27501 Phone: 919-397-6317
Subdivision: 10 wait	Glenn	Lot: 181
Description of Proposed	Work: install water line for	Total Job Cos (1500
	General Contractor Inform	
Building Contractor's Co	mpany Name	Telephone
Address		Email Address
Address	HEATED SQ FT GARA	
License #	HEATED SQ FT GARA	10E 30 F1
	Electrical Contractor Info	rmation
Description of Work	Service	Size:Amps T-Pole:YesNo
Electrical Contractor's C	Omnany Name	Telephone
Electrical Contractor's C	ompany Name	t description of the control of the
Address		Email Address
	-	
License #	Mechanical/HVAC Contractor	Information
Description of Work	incondinion in the contractor	
Description of Work		
Mechanical Contractor's	s Company Name	Telephone
Address		Email Address
License #	Plumbing Contractor Info	ormation
Description of Work Q	Plumbing Contractor Info	2 bor # Baths O
Honoro mer (2)	I wad not be work	919-357-6317
Plumbing Contractor's	Lbe doing the work	Telephone
88 Florentine C	H Angior NC 27501	WjeSSico 249@ 204 cur Email Address
Address		Elligii Address
License #		
	Insulation Contractor Info	ormation
	0.0.1	Telephone
Inculation Contractor's	Company Name & Address	i cichinile

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.







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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 JOSSica White Mailing Address: 88 Florentine Ct
City: AGGICT State: NC Zie 350 Contact No: 919-397-1037 Email: Wassica 2190 COL CON
APPLICANT JOSSICO White Mailing Address: 88 Plotentino Ct
City: Applicant information if different than landowner  State: S
ADDRESS: Plocaphia Ct Argiar, HC PIN:  Zoning: Flood: Watershed: Deed Book / Page:
Zoning: Flood: Watershed: Deed Book / Page:
Setbacks - Front: Back: Side: Corner:
PROPOSED USE:  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:SWDWTW (Size x ) # Bedrooms:Garage:(site built? ) Deck:(site built? )
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT
Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees:
Addition/Accessory/Other: (Sizex) Use: inStall water Line for water Closets in addition? () yes () no TOTAL HTD SQ FT_U55 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 Sump Dump
(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 () no
Does the property contain any easements whether underground or overhead () yes () no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
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.

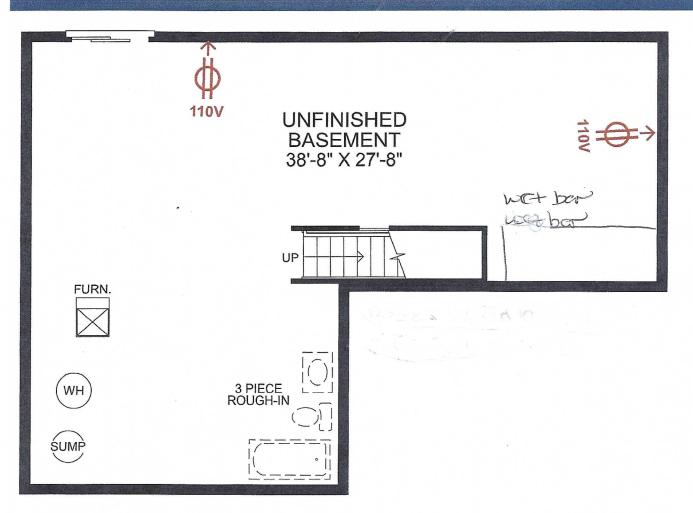
Signature of Owner or Owner's Agent

\*\*\*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\*\*



## Elm - Basement



## BASEMENT ELEVATION K

Selected Options: Unfinished Basement Behind Garage, Basement Sliding Glass Door, 3 Piece Rough-In

**Unselected Options:**