

Initial Application Date: 7-8-08

SEARCHED 7-7-08
DATE

Application # 0850020464R

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

108 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525

Fax: (910) 893-2793

www.harnett.org/permits

LANDOWNER: Roberto Deharo Mailing Address: 862 Silas Moore Rd.

City: BENSON State: NC Zip: 27504 Home #: _____ Contact #: _____

APPLICANT: MARICRUZ DEHARO Mailing Address: _____

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone #: _____

PROPERTY LOCATION: Subdivision w/phase or section: Margaret M. Memorial Lot #: 9 Lot Acreage: 2.50

State Road #: 1557 State Road Name: Silas Moore Rd. Map Book & Page: 234, 1068

Parcel: 07 1611 0098 09 PIN: 1611-23-2693-008

Zoning: BA20M Flood Zone: X Watershed: N/A Deed Book & Page: 234, 484 Power Company*: _____

*New homes with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 210N turn (R) onto 420(Hwy) toward Dunn. Turn (L) onto Hwy 27 toward Benson. Turn (L) onto Old Fairground Rd. Turn (L) onto Silas Moore Rd.

PROPOSED USE:

Circle:

- SFD (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Deck _____ Crawl Space / Slab
(Is the bonus room finished? _____ w/ a closet _____ if so add in with # bedrooms)
- Mod (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Site Built Deck _____ ON Frame / OFF
(Is the second floor finished? _____ Any other site built additions? _____)
- Manufactured Home: SW DW TW (Size 16 x 80) # Bedrooms 3 Garage _____ (site built? _____) Deck _____ (site built? _____)
- Duplex (Size _____ x _____) No. Buildings _____ No. Bedrooms/Unit _____
- Home Occupation # Rooms _____ Use _____ Hours of Operation: _____ #Employees _____
- Addition/Accessory/Other (Size _____ x _____) Use _____ Closets in addition ()yes ()no

Water Supply: County () Well (No. dwellings _____) **MUST** have operable water before final

Sewage Supply: New Septic Tank (Complete Checklist) () Existing Septic Tank (Complete Checklist) () County Sewer

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

Structures (existing & proposed): Stick Built/Modular _____ Manufactured Homes Lexs Other (specify) _____

Required Residential Property Line Setbacks: Comments: Dunn H

Front Minimum 35 Actual 328 303 _____

Rear 25 150 175 _____

Closest Side 10 26 _____

Sidestreet/corner lot _____

Nearest Building on same lot 6 252 _____

8/22/08 REVISION PER E HEALTH
NO FEE

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.

Maricruz Deharo

7/8/08

Signature of Owner or Owner's Agent

Date

This application expires 6 months from the initial date if no permits have been issued

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY

