

4.17.09
4/3/09

4.17.09
SCANNED
4/10/09
DATE

8-28-09

Initial Application Date: 4/3/09 Application # 0950021862RH

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: DAVID E. Hubbard Mailing Address: 450 MOONSHINE LANE

City: SANFORD State: NE Zip: 27332 Home #: 919-499-1737 Contact #: 336-736-0054

APPLICANT: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: DAVID E. Hubbard Phone #: 336-736-0054

PROPERTY LOCATION: Subdivision w/phase or section: _____ Lot #: 1A Lot Acreage: 2.66

State Road #: 1274 State Road Name: CORTEZ MORRISON Map Book&Page: 2008, 649

Parcel: 13 0611 0027 03 PIN: 0611 43 4937.000

Zoning: RA30 Flood Zone: X Watershed: 1V Deed Book&Page: 2599, 933 Power Company*: SouthRiver

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 North 8 miles Turn Right onto Cortez Morrison Rd go 8 Tenths mile Land on Left side of Road.

PROPOSED USE:

- SFD (Size x) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Deck _____ Circle: _____ 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 28 x 64) # Bedrooms 2 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 (X) Well (No. dwellings _____) **MUST** have operable water before final
Sewage Supply: (X) 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 (X) NO
Structures (existing & proposed): Stick Built/Modular _____ Manufactured Homes X Other (specify) _____

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>134</u>
Rear		<u>25</u>		<u>294</u>
Closest Side		<u>10</u>		<u>50</u>
Sidestreet/corner lot				<u>5</u>
Nearest Building on same lot		<u>6</u>		<u>7</u>

Comments: proposed
Proposed well and septic locations shown on map
Revised site plan per customer. Per Kevin Masman

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.
David E. Hubbard 3-30-09 djohnson
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

LAND USE Please use Blue or Black Ink ONLY
8-28-09 Revised site plan to show proposed
hole back. - - - drawn

