



Received: 01/24/19

Initial Application Date: 01/24/19

Application # SFD 1901-0021

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 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: Mark + Allison Eason Mailing Address: 27 Brandon Dr.
City: Lillington State: NC Zip: 27546 Contact No: 252-916-3615 Email: _____

APPLICANT: Hugh Surles Builders Mailing Address: 126 Brandon Dr.
City: Lillington State: NC Zip: 27546 Contact No: 919 422 7065 Email: hughsurlesbuilders@gmail.com
*Please fill out applicant information if different than landowner

ADDRESS: 27 Brandon Dr. PIN: 0670-20-7678.000

Zoning: R40 Flood: N/A Watershed: Great Falls Deed Book / Page: 3582: 0170

Setbacks - Front: 37 Back: 25 Side: 49 Corner: 65

PROPOSED USE:

- SFD: (Size 81'4" x 75'4") # Bedrooms: 3 # Baths: 4.5 Basement (w/wo bath): _____ Garage: Deck: Crawl Space: Slab: _____ Slab: _____
(Is the bonus room finished? yes no w/ a closet? yes no (if yes add in with # bedrooms)
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(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: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? yes no

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 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]
Signature of Owner or Owner's Agent
1/23/19
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



Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Mark + Allison Eason Date: 1/22/19
Site Address: 27 Brandon Dr Lillington Phone: 252-916-3615
Subdivision: Kerth Hills Lot: 16
Description of Proposed Work: New construction

General Contractor Information

Hugh Surtles Builders LLC 919 422 7065
Building Contractor's Company Name Telephone
126 Brandon Dr. Lillington hugh.surtlesbuilders@gmail.com
Address Email Address
62559
License #

Electrical Contractor Information

Description of Work _____ Service Size: 200 Amps T-Pole: Yes No
Austin Dean Electrical Contractor 919-669-0063
Electrical Contractor's Company Name Telephone
2793 Baptist Grove Rd. Fuquay NC 27526 Austindeanelectrical@gmail.com
Address Email Address
2793-L
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Carolina Comfort Air 919-550-2492
Mechanical Contractor's Company Name Telephone
5212 Hwy 70 W
Address Email Address
20515
License #

Plumbing Contractor Information

Description of Work _____ # Baths 4.5
L R Glover Plumbing 919-820-0026
Plumbing Contractor's Company Name Telephone
PO Box 764 Benson NC 27504
Address Email Address
P17958
License #

Insulation Contractor Information

Live Green 5001 Old Peete Rd. Raleigh 919-453-6411
Insulation Contractor's Company Name & Address Telephone

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

