

Initial Application Date: 4-2-19

Application # <u>SFD 1964-0011</u>

Central Permitting 108 E. Front Street, Lillin	gton, NC 27546	Phone: (910) 893-7525 e	ext:2 Fax: (91	0) 893-2793 www.harnett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED	OR OFFER TO PL	JRCHASE) & SITE PLAN ARE RE	QUIRED WHEN SU	BMITTING A LAND USE APPLICATION**
LANDOWNER: Caviness Land Developm	20205	Mailing Address: 104	Robesc	on Street
City: Fayetteville state: NC	Zip: _20305	Contact No: 910.339.6	0330	Email: janine@cavinessland.com
APPLICANT*: SAME	Mailing A	ddress:		
City:State:	Zin:	Contact No:		
*Please fill out applicant information if different than landowner	er	Contact No.		Email:
CONTACT NAME APPLYING IN OFFICE: Tony F	ofi/Janine L	ightner	D	310 237 2832 / 910 339 6330
ADDRESS: 270 Angel Oak Drive	1 nt 21	410 0500	OC FF20	710.207.20027010.009.0090
DEED OR OTP: Contract to purchase inclu	ded	PIN: 0506-	-90-3336	
PROPOSED USE:			***************************************	
				Monolythic
SFD: (Size 33 x 55) # Bedrooms: 4 # Bat	ths: 2.5 Basemer	nt(w/wo bath): Garage:	Deck:	Crawl Space: Slab: Slab:
(is the bonus room finish	ned? (LLI) yes (no w/ a closet? () yes	s (L) no (if yes	add in with # bedrooms)
Mod: (Sizex) # Bedrooms # Bat	he Basaman	t (when both)		
(Is the second floor finis	hed? (ves (no Any other site built	Site Built De	ck: On Frame Off Frame
	ricar (LL) yes (The Any other site built	additions? ()	yes (L_I) no
Manufactured Home: SW DW TW (S	Sizex	# Bedrooms: Gara	ige: site buil	t? Deck: site built?
Duplex: (Sizex) No. Buildings:	No.	Bedrooms Per Unit:		
Home Occupation: # Rooms:Us	e:	Hours of Operation	on:	#Employees:
Addition/Accessory/Other: (Sizex) U	se:	***		_ Closets in addition? () yes () no
Water Supply: X County Existing Well _	New Well (# of dwellings using well complete New Well Application) *Must h	ave operable water before final
Sewage Supply: New Septic Tank Expansi			X County S	ne as New Tank) Sewer
(Complete Environmental Health Chec Does owner of this tract of land, own land that contains				
Does the property contain any easements whether und	lerground or over	thead (X) yes () no	or (ooo) or tract	nated abover () yes () no
Structures (existing or proposed): Single family dwelling				_ Other (specify):
If permits are granted I agree to conform to all ordinant I hereby state that foregoing statements are accurate a		ha Otala (18) (1 0)		
Janene Light	ren		3/21/19	
Signature of Owner	or Owner's Age	nt		
This application exp	sing informatio	ith any applicable informat rhead easements, etc. The n that is contained within t rom the initial date if permi CONTINUES ON BACK	county or its er	nployees are not responsible for any

strong roots • new growth

ANGEL OAK DRIVE

50 FT. PUBLIC R/W