

Initial Application Date: 1-29-2020

Application # SFD2001-0056

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: SOUTH-SCAN, INC. Mailing Address: 3128 GOLD DUST LN

City: WILLOW SPRING State: NC Zip: 27592 Contact No: 919-368-5405 Email: tttrinfo@gmail.com

APPLICANT*: SOUTH-SCAN, INC. Mailing Address: 3128 GOLD DUST LN

City: WILLOW SPRING State: NC Zip: 27592 Contact No: 919-368-5405 Email: tttrinfo@gmail.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: TAPANI KYMALAINEN Phone # 919-368-5405

PROPERTY LOCATION: Subdivision: CAROLINA LAKES Lot #: 64 Lot Size: .72 ACRES

State Road # 1114 State Road Name: BUFFALO LAKE RD Map Book & Page: PCA#11713

Parcel: _____ PIN: 9585-55-1658.000

Zoning: RA-20R Flood Zone: V Watershed: NO Deed Book & Page: 3737 10277 Power Company*: CENTRAL ELECTRIC

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

PROPOSED USE:

SFD: (Size 59 x 54) # Bedrooms: 4 # Baths: 4 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

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

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): _____

Required Residential Property Line Setbacks:

Front Minimum 35' Actual _____
Rear 25' _____
Closest Side 10' _____
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 27 TO BUFFALO LAKE RD TO CAROLINA

WAY RT TO COACHMAN WAY LF TO LOT ON LEFT

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.

BT: [Signature]

Signature of Owner or Owner's Agent

01/26/20

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