Initial Application Date:

Nearest Building

Residential Land Use Application

on same lot

Application #	FD2003-0017	
	CU#	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION gton, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

Central Permitting 1	08	E.	Front	Street,	Lilling
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"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" Mailing Address: 639 Executive Place Suite 400 LANDOWNER: Cates Building Inc. State: <u>nc</u> Zip: <u>18305</u> Contact No: <u>910.481.0503</u> Email: Building Inc Mailing Address: 639 Executive Place Suite 400 State: NC Zip: 28305 Contact No: 910-481-0503 Email: angie @ Cavi wess and cates . con *Please fill out applicant information if different than landowner Augie Fowler Phone # 910-481-0503 CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: Manars @ Lexington PT 20 Lot #: 148 Lot Size: 25ac ____ State Road Name: Artillery Lone, Comeron____ Map Book & Page: 2019, 44 PIN: 9595-41-2765. 000 Parcel: 09956520 0282 51 Flood Zone: no Watershed: no Deed Book & Page: 3708 / 0360 Power Company*: C Emc from Progress Energy. *New structures with Progress Energy as service provider need to supply premise number _ Monolithic PROPOSED USE: SFD: (Size 53 x 40) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): no Garage: Deck: Crawl Space: 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: Closets in addition? (___) yes (___) no Addition/Accessory/Other: (Size ____x___) Use:____ 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) ____ Existing Septic Tank (Complete Checklist) Does the property contain any easements whether underground or overhead (___) yes (____) no Manufactured Homes:______ Other (specify):___ Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Actual Front Rear Closest Side Sidestreet/corner lot

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PECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
permits are granted I agree to conform to all ordinance, and laws of the State of North Carolina regulating such work and the specifications of plans submitted hereby state that foregoing statements are accurate arts correct to the best of my knowledge. Permit subject to revocation if false information is provided. Signature of where or where's Agent 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