

Initial Application Date: \_\_\_\_\_

Application # \_\_\_\_\_

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: Denise C. Matthews Mailing Address: 496 Harvell Rd.

City: Coats State: NC Zip: 27521 Contact No: 919-669-2572 Email: \_\_\_\_\_

APPLICANT: Craig Matthews Realty Inc. Mailing Address: PO Box 399

City: Coats State: NC Zip: 27521 Contact No: 910-890-4330 Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Craig Matthews Phone # 910-890-4330

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: 5 Lot Size: 2.23

State Road # \_\_\_\_\_ State Road Name: Lilyanne Lane Map Book & Page: 2018-339

Parcel: \_\_\_\_\_ PIN: 0599-68-0526,000

Zoning: RA Flood Zone: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book & Page: 3205, 703 Power Company\*: Duke

\*New structures with Progress Energy as service provider need to supply premise number 72544625 from Progress Energy.

**PROPOSED USE: QD.**

SFD: (Size 37 x 75.5 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): \_\_\_\_\_ Garage:  Deck:  Crawl Space:  Slab: \_\_\_\_\_ Slab: \_\_\_\_\_  
no bonus room (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: 1 proposed Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks:	Comments:
Front Minimum _____ Actual _____	_____
Rear _____	_____
Closest Side _____	_____
Sidestreet/corner lot _____	_____
Nearest Building on same lot _____	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: take 421 South, TL Crawford Rd,  
before Coats City Limits TR Lilyanne Lane (gravel road)  
lot at end of street

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.

Craig Thomas Matthews  
Signature of Owner or Owner's Agent

8-18-20  
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\*\*