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Application #	

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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:____ Mailing Address: State: Zip: Contact No: Email: APPLICANT*: Mailing Address:_____ City: _____ State: ___ Zip: ____ Contact No: _____ Email: ____ *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: _____ Lot #:____ Lot Size: State Road #_____ State Road Name: _____ _____ Map Book & Page: _____/ PIN: Parcel: Zoning:______ Flood Zone:_____ Watershed:_____ Deed Book & Page:____ / ____Power Company*: _____ PROPOSED USE: Monolithic SFD: (Size ____x ___) # Bedrooms: __ # Baths: __ 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: Closets in addition? () yes () no Addition/Accessory/Other: (Size x) Use: 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:** Comments: Front Minimum_____ Actual____ Rear Closest Side Sidestreet/corner lot

Nearest Building on same lot

PECIFIC DIRECTIONS TO TH	IE PROPERTY FROM LILLINGTON:		
	_		
	conform to all ordinances and laws of the State tements are accurate and correct to the best of r		
	197		
	Signature of Owner or Owner's Agent	Date	_

This application expires 6 months from the initial date if permits have not been issued

^{***}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.***