

Initial Application Date: Application # CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27548 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits Central Permitting "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION!" LANDOWNER: Caviness & Cates Builidng and Development Co Malling Address: 639 Executive Place Ste 400 State: NC Zip: 28305 Contact No: (910) 778-7902 Email: pam@cavinessandcates.com City: Fayetteville APPLICANT*: same as above Mailing Address: State: Contact No: *Please fill out applicant information if different than landowne Zoning: RA-20R Flood: Watershed: NA Deed Book / Page: Setbacks - Front: Back: Side: Corner: PROPOSED USE: # Bedrooms: # Baths? Resement(w/wo bath): ___ Garage: ___ Deck: ___ Crawl Space: ___ Slab: ___ S SFD: (Size) TOTAL HTD SQ FT GARAGE SQ FT (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms)) # Bedrooms # Baths Basement (w/wo bath) Garage; Sile Built Deck: On Frame Off Frame Modular: (Size TOTAL HTD SQ FT (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: TOTAL HTD SQ ET Home Occupation: # Rooms:_____Use:____ Hours of Operation: #Employees: Addition/Accessory/Other: (Size ____ X ___) Use: _____ Closets in addition? (__) yes (__) no TOTAL HTD SQ FT GARAGE X County Existing Well New Well (# of dwellings using well) *Must have operable well (Need to Complete New Well Application at the same time as New Tank) Y. ____ New Septic Tank Expansion Relocation Existing Septic Tank X County Sewer (Complete Environmental Health Checklist on other side of application if Septic) _) *Must have operable water before final 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 (X) no Structures (existing or proposed): Single family dwellings:__ Manufactured Homes: ____ Other (specify): If permits are graphed 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 following statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent

It is the owner/applicants responsibility to provide the county with any applicable imformation 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 pennits have not been issued**

APPLICATION CONTINUES ON BACK

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