



Initial Application Date: 5/25/21

Application # SFD2105-0079

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: STICKLEY & COMPANY LLC Mailing Address: 258 WILLAMSDOFF CT
City: DUNN State: NC Zip: 28334 Contact No: 910-890-2160 Email: juststickland@3246.com

APPLICANT: JEREMY M. STICKLAND Mailing Address: 1330 LANE RD
City: DUNN State: NC Zip: 28334 Contact No: 910-890-2160 Email: juststickland@3246.com

ADDRESS: 94 PORTER DR ERWIN PIN: 0597-78-4193
Zoning: RESIDENTIAL Flood: NO Watershed: NO Deed Book / Page: 3841:0471

Setbacks - Front: 25 Back: 25 Side: 8 Corner: _____

PROPOSED USE:

SFD: (Size 30 x 50) # Bedrooms: 3 # Baths: 2 Basement(w/w bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: Monolithic Slab: _____
TOTAL HTD SQ FT 1270 GARAGE SQ FT _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/w bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
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 FT _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? () yes () no
TOTAL HTD SQ FT _____ GARAGE _____

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

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 Manufactured Homes: _____ Other (specify): _____

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.

Jeremy M. Stickland Signature of Owner or Owner's Agent Date: 5/25/21

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**

APPLICATION CONTINUES ON BACK

strong roots • new growth



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep 2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	STANLEY COMPANY LLC	Property Owner	Same as Applicant
Home Address	258 Wilwood Ct	Home Address	
City, State, Zip	Dunn NC 28324	City, State, Zip	
Telephone	919-422-5898	Telephone	
Email	ke@stanley.com	Email	

Address of Proposed Property	94 Porter Dr.		
Parcel Identification Number(s) (PIN)	0597-78-4193	Estimated Project Cost	\$90,000
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	single family home		
Description of any proposed improvements to the building or property	New construction / single family		
What was the Previous Use of the subject property?	Volant		
Does the Property Access DOT road?	No		
Number of dwelling/structures on the property already	0	Property/Parcel size	.428
Floodplain SFHA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Watershed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
MUST circle one that applies to property	Existing/Proposed Septic System Or Existing/Proposed County/City Sewer		

Owner/Applicant Must Read and Sign

PAID

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

<u>CAROL KORLEN</u> Print Name	<u>[Signature]</u> Signature of Owner or Representative	<u>3/31/21</u> Date
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For Office Use

Zoning District	R-6
Front Yard Setback	25'
Side Yard Setback	8'
Rear Yard Setback	25'

Existing Nonconforming Uses or Features	
Other Permits Required	<input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input type="checkbox"/> Other
Requires Town Zoning Inspection(s)	<input type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.
Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Fee Paid: 100	Date Paid: 3/31/2021 Staff Initials: SAC

Comments	New stick built SFD
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Signature of Town Representative: <u>[Signature]</u>	Date Approved/Denied: <u>3/31/2021</u>
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