

Initial Application Date: 0[23 2021

| Initial Application Date: (170000) | Application # |
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| | (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: Capitol City Homes, LLC Mailing | |
| City: Raleigh State: NC Zip: 27609 Contact No. | o: 919-872-0048 Email: irivera@capitolcity-homes.com |
| APPLICANT*: Ivette Rivera Mailing Address: Sa | |
| City: State: Zip: Contact No. *Please fill out applicant information if different than landowner. | o: Email: |
| ADDRESS: 199 Scholar Dive - 1114 | PIN: |
| Zoning: Nesidential Flood: Watershed: Deed Book / I | Page: |
| Setbacks - Front: 31 Back: 39 Side: 3 Corner: | |
| PROPOSED USE: | |
| SFD: (Siz#44_x52) # Bedrooms: 4 # Baths: 2 Basement(w/wo bath)N/A Garage: 4 Deck: 1/A Crawl Space: Slab. Sla | |
| ☐ Modular: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame TOTAL HTD SQ F1 (Is the second floor finished? () yes () no Any other site built additions? () yes () no | |
| ☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?) | |
| Duplex: (Sizex) No. Buildings: No. Bedrooms I | Per Unit:TOTAL HTD SQ FT |
| Home Occupation: # Rooms: Use: | Hours of Operation:#Employees: |
| Addition/Accessory/Other: (Sizex) Use: | Close's in addition? () yes () no |
| TOTAL HTD SQ FT GARAGE | |
| Water Supply: _x _ 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 (x) no |
| Ti and the state of the state o | ofactured 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. Signature of Owner's Agent | |
| Signature of Owner'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 lecation, 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

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