

Initial Application Date: 7/8/2021	Application #
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COUNTY OF H Central Permitting 108 E. Front Street, Lillington, 1	NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
	FFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: True Homes LLC	Mailing Address: 2649 Brekonridge Centre Dr 28110 Contact No: 704-238-1229 Email: ajones@truehomesusa.com
city: Monroe State: NC zip	: 28110 Contact No: 704-238-1229 Email: ajones@truehomesusa.com
APPLICANT*: True Homes LLC/Ashley Jones Mailing Address: 2649 Brekonridge Centre Dr	
city: Monroe state: NC zip	: 28110 Contact No: 252-373-9864 Email: ajones@truehomesusa.com
CONTACT NAME APPLYING IN OFFICE: Ashley Jon	es Phone # (252)373-9864
ADDRESS: WALKER GROVE LANE, Lillingt	on, NC, 27546 PIN: 0651-86-7878
DEED OR OTP:	nes Phone # (252)373-9864 on, NC, 27546 PIN: 051-80-7878
PROPOSED USE:	
SFD: (Size 68.9 x 40) # Bedrooms: 4 # Baths: 3	Basement(w/wo bath):Garage:Deck:Crawl Space:Slab:Monolithic
(Is the bonus room finished?	() yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
	Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame () yes () no Any other site built additions? () yes () no
Manufactured Home: SW DW TW (Size_	x) # Bedrooms: Garage:(site built? Deck:site built?
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
Home Occupation: # Rooms: Use: Use:	Hours of Operation:#Employees:
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
Water Supply: County Existing Well	New Well (# of dwellings using well) *Must have operable water before final same time as New Tank)
Sewage Supply: New Septic Tank Expansion	Relocation Existing Septic Tank County Sewer
(Complete Environmental Health Checklist Does owner of this tract of land, own land that contains a m	anufactured home within five hundred feet (500') of tract listed above? () yes () no
Does the property contain any easements whether undergr	
Structures (existing or proposed): Single family dwellings:	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. Oahlu Conus. 7/8/2021	
Signature of Owner or 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 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	

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