

Initial Application Date: 10/18/21 Application # CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546 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: D.R. Horton Inc. Mailing Address: 2000 Aerial Center Parkway Ste. 110A State: NC Zip: 27560 Contact No: 919-407-2037 Email: aaerving-young@drhorton.com City: Morrisville APPLICANT*: D.R. Horton Inc./Ally Moss Mailing Address: 2000 Aerial Center Parkway Ste. 110A State: NC Zip: 27560 Contact No: 919-407-2037 Email: aaerving-young@drhorton.com *Please fill out applicant information if different than landowner ADDRESS: 93 RED CEDAR WAY LOT 199 PIN: 0653-66-6122,000 Zoning: RA-30 Flood: MINIMAL Watershed: WS-IV Deed Book / Page: 3688:0768 Back: 44.7' Side: 21.5 Corner: 21.5 Setbacks – Front: 22' **PROPOSED USE:** SFD: (Size 38' x 36') # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): Garage: V Deck: Crawl Space: Slab: Slab: V TOTAL HTD SQ FT 2175 GARAGE SQ FT 409 (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/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:_____ 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: V County Existing Well Mew Well (# of dwellings using well) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank) : ___New Septic Tank ___Expansion ___Relocation ___Existing Septic Tank ___V 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 (\checkmark) yes (__) no Other (specify):__ Structures (existing or proposed): Single family dwellings: **proposed** Manufactured Homes: 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. Ally Moss Signature of Owner or Owner's Agent 10/18/21

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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