

Application#____

Initial Application Date: 1.18.23

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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27548 Phone: (910) 893-7525 ext.2 Fax: (910) 893-2793 www.harnelt.org/permits
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 Mailing Address: 639 Executive Place Ste 400
City: Payetteville State: NC Zip: 28305 Contact No: (910) 778-7902 Email: pam@cavinessandcates.com
APPLICANT*: same as above Mailing Address:
City: State: Zip: Contact No: Email: 28390
ADDRESS: 345 Timber SKID Or. Springlakene PIN: 0505- 85- 3651.000
Zoning: RA-20R Flood: 16 Watershed: NA Deed Book / Page: 1707 0000
Setbacks - Front: 43'9" Back: 25.6 Side: 6.0 Corner:
ADADOSED LISE:
□ SFD: (Size U5 x 28) # Bedrooms: 4 # Baths: 25 Basement(w/wo bath): Garage: □ Deck: Crawl Space: □ Slab: Slab: □ S
Modular: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame [OTAL-HTO-SQIE]
Manufactured Home:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: TOTALHTD/SQ/RT
☐ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
TOTAL HID SOIFT 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) Sawage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sawar (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 properly contain any easements whether underground or overhead () yes () no
Structures (existing or proposed); Single family dwellings: Single Manufactured Homes: Other (specify):
If permits are grapted 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 folegoing 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 The country 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