

Initial Application Date: Application #
CU#
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 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: NEILLS CREEK THEN NC LLC Mailing Address: 3100 SMOKERESE CT # 210
City: Zrecant State: NC Zip: 27604 Contact No: 410-212-4060 Email: bbloogh @CHESHONES. CON
APPLICANT*: CHESA PEAKE HOMES Mailing Address: 3100 SMOKETREE CT # 210
City: RACEGIF State: Zip: ZIP: ZIP: ZIP: ZIP: ZIP: ZIP: ZIP: ZIP
ADDRESS: 17 WINDING CREEK DR PIN:
Zoning: Flood: Watershed: Deed Book / Page:
Setbacks - Front: 25 Back: 20 Side: 10 Corner: 20
PROPOSED USE:
SFD: (Size 48 x 43.5) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
TOTAL HTD SQ FT 2806 GARAGE SQ FT 4129 (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
☐ Modular: (Sizex) # Bedrooms# Baths Basement (w/wo 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
□ Addition/Accessory/Other: (Sizex) 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 Sortic Tank Expension Pelception Existing Seption Tank Sewage Supply: New Sortic Tank Expension Pelception Existing Seption Tank Sewage Supply: New Sortic Tank Expension
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: 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.
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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