

		Application #		
	COUNTY OF HARNETT RESIDEN			
Central Permitting 420 McKinney Pk	kwy, Lillington, NC 27546 Phon	ne: (910) 893-7525 ext:1 Fax:	: (910) 893-2793 www.harnett.org/permits	
**A RECORDED SURVEY MAP, RECORE	DED DEED (OR OFFER TO PURCHASE)	& SITE PLAN ARE REQUIRED WHEN	N SUBMITTING A LAND USE APPLICATION**	
LANDOWNER: Mattamy Homes LLC	Maili	ing Address: 11000 Re	gency Pkwy	
City: Cary State: N	C Zip: 27518 Contact No:	9192333886 Email:R	aleigh PlanReview@mattamycorp.com	
APPLICANT*:	Mailing Address:			
City:SI *Please fill out applicant information if different than		No:E	mail:	
ADDRESS: 110 Denali Drive, Angie	er, NC 27501 [	PIN:0682-29-0579	.000	
Zoning: Flood: W	/atershed: Deed Book	/ Page:		
Setbacks – Front: 70' Back: 83	.0' Side: 113.8' and 10.	<u>.4'</u> Corner:'		
PROPOSED USE:				
• SFD: (Size <u>72.0' x 49.5'</u> ) # Bedroom	s: 3 # Baths: 2 Basement(w/wo	bath): no Garage: yes Deck	Monolithic : <u>no</u> Crawl Space: <u>no</u> Slab: <u>_no</u> Slab: <u>_yes</u>	
			et? (_) yes (_) no (if yes add in with # bedroom	
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	(10 1110 10001111 110011 11111 11111 11111 11111 11111 11111 1111		<u> </u>	
☐ Manufactured Home:SWDW _	TW (Sizex) # Be	edrooms: Garage:(site	built?) Deck:(site built?)	
□ Duplex: (Size x ) No. Buildin	ngs:No. Bedroom	ns Per Unit:	TOTAL HTD SQ FT	
Duplex. (Sizex) No. Buildin			101/1211115 00111	
	Use:	Hours of Operation:	#Employees:	
☐ Home Occupation: # Rooms:			#Employees:	
□ Home Occupation: # Rooms:  □ Addition/Accessory/Other: (Sizex			#Employees:	
☐ Home Occupation: # Rooms:x ☐ Addition/Accessory/Other: (Sizex  TOTAL HTD SQ FT GAR	:) Use:		#Employees: Closets in addition? () yes () no	
☐ Home Occupation: # Rooms:x ☐ Addition/Accessory/Other: (Sizex  TOTAL HTD SQ FT GAR  Water Supply:yes County Exis	RAGE sting Well New Well (# of a	dwellings using well) in the same well and the same well New Well Application at the same well and the same well and the same well are the same well	#Employees:  Closets in addition? () yes () no  *Must have operable water before final te time as New Tank)	
□ Home Occupation: # Rooms:  □ Addition/Accessory/Other: (Sizex  TOTAL HTD SQ FT GAF  Water Supply: Yes County Exist  Sewage Supply: New Septic Tank (Complete Environmental Heat	RAGE  sting Well New Well (# of a (Need to Complete New Yell ) Expansion Relocation Relocation (alth Checklist on other side of application (alth Checklist on other side of application)	dwellings using well)  New Well Application at the sam Existing Septic TankyesC	#Employees:  Closets in addition? () yes () no  *Must have operable water before final time as New Tank) County Sewer	
□ Home Occupation: # Rooms: x  □ Addition/Accessory/Other: (Sizex  TOTAL HTD SQ FT GAF  Water Supply: Yes County Exist  Sewage Supply: New Septic Tank (Complete Environmental He:  Does owner of this tract of land, own land that	sting Well New Well (# of a (Need to Complete New Application Relocation alth Checklist on other side of applications a manufactured home with the contains a manufactured home.	dwellings using well) in the same the same to see the	#Employees:  Closets in addition? () yes () no  *Must have operable water before final time as New Tank) County Sewer	
□ Home Occupation: # Rooms:  □ Addition/Accessory/Other: (Sizex  TOTAL HTD SQ FT GAF  Water Supply: Yes County Exist  Sewage Supply: New Septic Tank (Complete Environmental Heat	sting Well New Well (# of a (Need to Complete New Application Relocation alth Checklist on other side of applications a manufactured home with the contains a manufactured home.	dwellings using well) in the same the same to see the	#Employees:  Closets in addition? () yes () no  *Must have operable water before final time as New Tank) County Sewer	
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□ Home Occupation: # Rooms: Addition/Accessory/Other: (Sizex  TOTAL HTD SQ FT GAF  Water Supply: yes County Exist  Sewage Supply: New Septic Tank (Complete Environmental Head Does owner of this tract of land, own land that Does the property contain any easements who structures (existing or proposed): Single family	sting Well New Well (# of a (Need to Complete I) Expansion Relocation alth Checklist on other side of appliat contains a manufactured home whether underground or overhead () ily dwellings: yes Ill ordinances and laws of the State	dwellings using well	#Employees:  Closets in addition? () yes () no  *Must have operable water before final tertime as New Tank) County Sewer  tract listed above? () yes (no) no  Other (specify):  ch work and the specifications of plans submitte	
SFD: (Size 72.0' x 49.5') # Bedrooms  TOTAL HTD SQ FT 2339 GARAGE SQ FT  Modular: (Sizex) # Bedroom  TOTAL HTD SQ FT  Manufactured Home:SWDW _	458 (Is the bonus room finished states and the bonus room finished states are also as the bonus room finished (w/w (Is the second floor finished? (	ed? () yes (_no_) no w/ a clos wo bath) Garage: Site _) yes () no Any other site l edrooms: Garage:(site	:_no_ Crawl Space:_no_ Slab:_no_ Slab et? (_) yes (_) no (if yes add in with # bed Built Deck: On Frame Off Fram built additions? () yes () no  built?) Deck: (site built?)	

\*\*\*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\*\*