



BC SMOKE A LITTLE SMOKE,LLC

Initial Application Date: 02/23/2024

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: BC SMOKE A LITTLE SMOKE, LLC Mailing Address: 336 JAMES RECORD ROAD

City: HUNTSVILLE State: AL Zip: 35824 Contact No: (205) 999-6903 Email: levi@builttoinvest.com

APPLICANT*: DAVIDSON HOMES, LLC- RALEIGH Mailing Address: 1903 N. HARRISON AVE SUITE 200

City: CARY State: NC Zip: 27513 Contact No: 252-283-2036 Email: mstephens@davidsonhomesllc.com

*Please fill out applicant information if different than landowner

ADDRESS: 34 LOOPING COURT, ANGIER, NC 24501 PIN: 0693-25-0753.000

Zoning: RA-30 Flood: Minimal Flood Risk Southern Coastal Watershed: Plain - 133A Deed Book / Page: 4207 : 1567

Setbacks - Front: 35' Back: 25' Side: 10' Corner: 20'

PROPOSED USE:

[X] SFD: (Size 56'6" x 58') # Bedrooms: 4 # Baths: 3.5 Basement(w/wo bath): N/A Garage: X Deck: ___ Crawl Space: X Slab: ___ Slab: ___ Monolithic
TOTAL HTD SQ FT 2555 GARAGE SQ FT 744 (Is the bonus room finished? (X) yes (___) no w/ a closet? (X) 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 ___
TOTAL HTD SQ FT (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: [X] 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: [X] 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 (X) yes (___) no

Structures (existing or proposed): Single family dwellings: 1 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.

Mindi Stephens

DAVIDSON HOMES RALEIGH DIVISION PERMITTING COORDINATOR

02/23/2024

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