

BC SMOKE A LITTLE SMOKE,LLC

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: 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: 984-217-8561 Email: CHowell@davidsonhomesllc.com

*Please fill out applicant information if different than landowner

ADDRESS: 62 GOLDEN LEAF FARMS ROAD, ANGIER, NC 24501 PIN: 0693-24-2421

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

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

PROPOSED USE:

SFD: (Size 61' x 72'6") # Bedrooms: 5 # Baths: 4.5 Basement (w/wo bath): N/A Garage: X Deck: _____ Crawl Space: X Slab: _____ Slab: _____
TOTAL HTD SQ FT 3922 GARAGE SQ FT 854 (Is the bonus room finished? N/A 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 _____
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.



DAVIDSON HOMES RALEIGH DIVISION
PERMITTING COORDINATOR

Signature of Owner or Owner's Agent

03/04/24

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