



Initial Application Date: _____

Application # _____

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

CU# _____

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: United Equitable Properties Mailing Address: 6735 Benson Harder R2
City: Benson State: NC Zip: 27504 Contact No: _____ Email: _____

APPLICANT: Serenity Built Homes Mailing Address: PO Box 1417
City: Lillington State: NC Zip: 27546 Contact No: 910-984-7042 Email: Klawrence@capitalmarblecreations.com
*Please fill out applicant information if different than landowner

ADDRESS: Lot 6 Williams R2 PIN: 1600-43-2091.000

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

- 1598 49x50 Bonus 262 1860
☐ SFD: (Size _____) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____
(Is the bonus room finished? 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 _____
(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: _____
☐ Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
☐ Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? _____ yes _____ no

Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
Sewage Supply: _____ New Septic Tank X 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 X 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]
Signature of Owner or Owner's Agent

11-18-24
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

strong roots • new growth