

Initial Application Date: 11/22/2024 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** 8521 Six Forks Road, #500 **Drees Homes** LANDOWNER: Mailing Address: Raleigh State: NC Zip27615 Contact No: 919-844-9288 Email: ttrefftzs@dreeshomes.com APPLICANT*: Teri Trefftzs/Drees Homes Mailing Address: Same as Above City: State: __ Contact No: _ Email: *Please fill out applicant information if different than landowner PIN: 0655-13-5804.000 ADDRESS: 55 Graceful Row, Lot 354 **Hector Creek** Zoning: RA-30 Flood: N/A Watershed:___ Deed Book / Page: 4109/210 Setbacks - Front: 20' Back: 20' Side: 5' Corner: 12' PROPOSED USE: SFD: (Size 52'-11" x 38'7") # Bedrooms: 4 # Raths: 3 Basement(w/wo bath): Garage: X Deck: Crawl Space: Slab: Slab: X TOTAL HTD SQ FT 2247 GARAGE SQ FT the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (X_) no (if yes add in with # bedrooms) _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** County ____ Existing Well ____ New Well (# of dwellings using well ____ _) *Must have operable water before final Water Supply: (Need to Complete New Well Application at the same time as New Tank) : ____ New Septic Tank ___ Expansion ___ Relocation ___ Existing Septic Tank __X 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 (X__) 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

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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