

12/00/2024 Init

Initial Application Date: 12/09/2024	Application #	
		CU#
	RNETT RESIDENTIAL LAND USE APPLIC C 27546 Phone: (910) 893-7525 ext:1	
A RECORDED SURVEY MAP, RECORDED DEED (OR OFF	ER TO PURCHASE) & SITE PLAN ARE REQUIRED	WHEN SUBMITTING A LAND USE APPLICATION
LANDOWNER: DRP MULTISTATE D, LLC	Mailing Address: 59 MADISC	ON AVENUE, 13TH FLOOR
City: <u>NEW YORK</u> State: <u>NY</u> Zip:	10022 Contact No: (919) 376-6869	Email: bnelson@davidsonhomes.com
APPLICANT*: DAVIDSON HOMES, LLC- RALEIGH _ M	ailing Address: 1903 N. HARRISON AVE	SUITE 200
City: CARY State: NC Zip: *Please fill out applicant information if different than landowner	•	Email: ralpermitting@davidsonhomes.com
ADDRESS:_415 OLD FASHIONED WAY, LILLINGTON)
Minimal Souther Zoning: RA-30 Flood: Flood Risk Watershed: Plain - 1	n Coastal 133A Deed Book / Page: 4262:2538-25 4	1
Setbacks – Front: <u>35'</u> Back: <u>25'</u> Side: <u>10'</u>	-	
PROPOSED USE:		
SFD: (Size <u>40' x 46'</u>) # Bedrooms: <u>5</u> # Baths: <u>4</u>	Basement(w/wo.bath):N/A Garage: X De	Monolithic eck: Crawl Space: X Slab: Slab:
TOTAL HTD SQ FT 3104 GARAGE SQ FT 785 (Is the bo	· · · · · · · · · · · · · · · · · · ·	
Modular: (Size) # Bedrooms# Baths TOTAL HTD SQ FT (Is the second)		
Manufactured Home:SWDWTW (Size	x) # Bedrooms: Garage:	_(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	TOTAL HTD SQ FT
Home Occupation: # Rooms:Use:	Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use:		Closets in addition? () yes () no
TOTAL HTD SQ FT GARAGE		
Water Supply: X County Existing Well N	ew Well (# of dwellings using well	<i>)</i> *Must have operable water before final e same time as New Tank)
Sewage Supply: X New Septic Tank Expansion (Complete Environmental Health Checklist on	_ Relocation Existing Septic Tank	_ County Sewer
Does owner of this tract of land, own land that contains a man)') of tract listed above? () yes (X) no
Does the property contain any easements whether underground	nd or overhead (<u>X</u>) 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 I hereby state that foregoing statements are accurate and corr	ect to the best of my knowledge. Permit sub	
<u>Mundi Hapheus</u> <u>permitting coop</u> Signature of Owner or Own	RALEIGH DIVISION ADINATOR 1	2/09/2024
***It is the owner/applicants responsibility to provide the	county with any applicable information at	
	nformation that is contained within these	applications.***
*This application expires 6	months from the initial date if permits ha	ve not been issued**

APPLICATION CONTINUES ON BACK

strong roots • new growth