

Initial Application Date: 01/29/2025 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_ Zip: 27615 Contact No: 919-844-9288 ____ Email: __ttrefftzs@dreeshomes.com APPLICANT*: Teri Trefftzs/Drees Homes Same as Above __ Mailing Address:_ ____ Email: ___ _ Zip:____ Contact No: ___ State: *Please fill out applicant information if different than landowner PIN: 0655-13-5698-000 ADDRESS: 21 Graceful Row Hector Creek Zoning: RA-30 Flood: N/A Watershed: Deed Book / Page: 4244/2058 Setbacks - Front: 20' Back: 20' Side: 5' Corner: 12' PROPOSED USE: SFD: (Size ____x___) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): X Garage: X Deck: Crawl Space: Slab: X TOTAL HTD SQ FT 2591 GARAGE SQ FT 427 (Is the bonus room finished? () yes (X) no w/a closet? () yes (X) 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: 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 wat (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) __) *Must have operable water before final 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:

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.

Signature of 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.

01/29/2025

*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

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.

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