

Initial Application Date: 01/31/2025 Application # CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits **Central Permitting** **A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION** LANDOWNER: IOM DEVELOPERS INC & A NORTH CAROLINA CORPORATION Mailing Address: 466 STANCIL ROAD ANGIER, NC 27501 City: ANGIER _ State: NC Zip: 27501 Contact No: (919) 376-6869 Email: bnelson@davidsonhomes.com APPLICANT*: DAVIDSON HOMES, LLC - RALEIGH Mailing Address: 1903 N. HARRISON AVE, SUITE 200 State: NC Zip: 27513 Contact No: (252) 283-2036 Email: ralpermitting@davidsonhomes.com City: CARY *Please fill out applicant information if different than landowner ADDRESS: 54 CULTIVATOR COURT, ANGIER, NC 24501 PIN: 0693-26-0593.000 Minimal Minimal Southern Coastal

Flood: Flood Risk Watershed: Plain - 133A Deed Book / Page: 4216: 2256 Zoning: RA-30 __ Back: <u>25'</u> Side: <u>10'</u> Corner: <u>20'</u> Setbacks – Front: 35' **PROPOSED USE:** SFD: (Size 40' x 50') # Bedrooms: 4 # Baths: 3.5 Basement(w/wo bath): N/A Garage: X Deck: Crawl Space: X Slab: Slab: TOTAL HTD SQ FT 2719 GARAGE SQ FT 785 (Is the bonus room finished? N/Ayes () 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:____ Closets in addition? (___) yes (___) no Addition/Accessory/Other: (Size x) Use: TOTAL HTD SQ FT **GARAGE** Water Supply: X County Existing Well Mew Well (# of dwellings using well ______) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank) : X New Septic Tank ____ Expansion ____ Relocation____Existing Septic Tank ____ County Sewer (Complete Environmental Health Checklist on other side of application if Septic) Sewage Supply: X New Septic Tank _ 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 1 ____ Manufactured Homes:____ Other (specify):_ Structures (existing or proposed): Single family dwellings:

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.

Mundu Hapheus DAVIDSON HOMES RALEIGH DIVISION PERMITTING COORDINATOR Signature of Owner or Owner's Agent

01/31/2025 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