

Initial Application Date: 4/24/25 Application # CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 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** Mailing Address: 2000 Aerial Center Pkwy. Ste. 110-A LANDOWNER: D.R. Horton Inc. State: NC Zip: 27560 Contact No: 984-327-8357 Email: jnupchurch@drhorton.com City: Morrisville APPLICANT*: D.R. Horton, Inc./ Jennifer Upchurch

Mailing Address: 2000 Aerial Center Pkwy. Ste. 110-A City: Morrisville

State: NC
*Please fill out applicant information if different than landowner

State: NC

State: NC

State: NC

Zip: 27560

Contact No: 984-327-8357

Email: jnupchurch@drhorton.com ADDRESS: 164 Gilmer Street Lot 13 PIN: 0665-40-9818.000 Zoning: RA-30 Flood: Minimal Watershed: Deed Book / Page: 4222 : 2648 PROPOSED USE: SFD: (Size 55' x 40') # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): Garage: V Deck: Crawl Space: Slab: Slab: V TOTAL HTD SQ FT 2651 GARAGE SQ FT 399 (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 ___ 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** Water Supply: ____ County ____ Existing Well ____ New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: ____ New Septic Tank ___ 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 () no Does the property contain any easements whether underground or overhead () yes (__) no Structures (existing or proposed): Single family dwellings: proposed 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. 4/24/25 Jenniter Upchurch

Signature of Owner or Owner's Agent

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

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