



Initial Application Date: _____

Application # _____

DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 420 McKinney Pkwy, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 1 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Guidon Pediatric Therapy Mailing Address: 1624 - NC 24

City: Cameron State: NC Zip: 28326 Contact # 9104361021 Email: sbrowning@guidontherapy.com

APPLICANT*: Parish Signs Mailing Address: PO Box 766

City: Raeford State: NC Zip: 28376 Contact # 9108756121 Email: Courtney@parishsigns.com

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Parish Signs Phone # 9108756121

Address: PO Box 766 Raeford NC 28376 PIN: _____

Zoning: Watershed: _____ Flood: _____ Deed Book Page: 1

Setbacks – Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____

Business Sq. Ft. Retail Space: _____ Type: sign # Employees: _____ Hours of Operation: 8-5pm

Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____

Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____

Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____

Accessory/Addition/Other (Size 48" x 96") Use: illuminated wall sign. 32#

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)

Comments: See attached sign drawing.

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.

Courtney
Signature of Owner or Owner's Agent

2/6/23
Date

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

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

*****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.*****