



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: RiverWILD Homes Mailing Address: 114 W. Main St. Clayton
City: Clayton State: NC Zip: 27520 Contact # 919-901-3178 Email: dave@staywild.com

APPLICANT*: SIGNAGE OF CLAYTON Mailing Address: 318 W. MAIN ST
City: CLAYTON State: NC Zip: 27520 Contact # 919-422-3197 Email: bs2045@NC-RR.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: BOB SATTERFIELD Phone # 919-422-3197

Address: 318 W. MAIN ST CLAYTON NC PIN: 1509-01-8743-000

Zoning: RA-30 Watershed: N/A Flood: N/A Deed Book Page: 4281, P26

Setbacks – Front: _____ Back: _____ Side: _____ Corner: 20'

PROPOSED USE:

- ☐ Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- ☐ Business Sq. Ft. Retail Space: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- ☐ Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- ☐ Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- ☐ Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____
- ☒ Accessory/Addition/Other (Size 80 x 20⁺⁶⁰) Use: SIGN

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: SIGN PERMIT FOR ALTON FIELDS

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.

Bob Satterfield
Signature of Owner or Owner's Agent

6-27-25
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.*****