



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: AAIC Properties Mailing Address: 3179 NC210N. Lillington
City: Lillington State: NC Zip: 27546 Contact # Cam Burns Email: netruckandtrade@gmail.com

APPLICANT*: Michele Marotta Mailing Address: 7003 Hwy 210 N.
City: Angier State: NC Zip: 27501 Contact # 9196393475 Email: michele@cardinalsignandservice.com

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Michele Marotta Phone # 9196393475
Address: 1365 Sadler Rd. Dunn PIN: 1537073010.000

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

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

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 85' x 75') Use: illuminated channel letters + cabinet

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: _____

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.

Michele Marotta
Signature of Owner or Owner's Agent

9/27/25
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.