

Application for Environmental Health Improvement Permit
 Date: 5-20-98
 008475

COUNTY OF HARNETT



PROPERTY DESCRIPTION/LAND USE PERMIT
 APPLICANT INFORMATION:

NAME: Jacks, Bm
 ADDRESS: 829A CHRISTIAN LIGHT RD
 TRYON-VARINA, NC 27576
 PHONE: 919-283-3884

NAME: Jacks, Ronald
 ADDRESS: 154 MEALS MEADOW DR
 TRYON-VARINA NC
 PHONE: 919-388-2333

PROPERTY LOCATION:
 STREET ADDRESS ASSIGNED: Meals Meadows
 ST # 142
 RD. NAME: Parshonville Rd
 TOWNSHIP: OS
 FIRE: RESIDE

TAX MAP NO. 64535 PART: NO. 5180
 FLOOD PLAIN: PANEL 10
 DIVISION: Meals Meadows
 ZONING DISTRICT: RA-30
 WATER DIST. _____
 PLAT BOOK: 98 PAGE 35
 DEED BOOK: 2116 PAGE 2116

GIVE DIRECTIONS TO THE PROPERTY FROM ILLINOIS: TAKE 401 N TO
 APPROXIMATE CHRISTIAN LIGHT RT, TURN LEFT, TAKE CHRISTIAN LIGHT RD. MEALS MEADOW
 RD AND TURN LEFT, THIRD LOT ON THE RIGHT.

- 20 Family Dwelling (Size 30x40 # of Bedrooms 3 Basement Deck)
- Multi-Family Dwelling (Size 10x12) # of Bedrooms/units
- Manufactured Home (Size x) # of Bedrooms
- Deck (Size x)
- Number of persons per household
- Business Soft Retail Goods
- Industry Soft
- Home Occupation No. Rooms/Size
- Accessory Bldg. Size
- Addition to Existing Bldg. Size
- Sign
- Other

Water Supply: County Well (No. Dwellings) Other
 Sewer: Sewer Tank (Existing?) County Other
 Are there any wells not on this lot but within 40 ft of the property line (shown on site plan)?

NOTE: A site plan must be attached to this Application, drawn to scale on an 8.5 by 11 sheet, showing: existing and proposed buildings, well, and any wells within 40 feet of your property line.

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SETBACK REQUIREMENTS

	Actual	Minimum/Maximum Required
Front property line	75	35
Side property line	50	10
Corner side line		20
Rear Property Line		25
Nearest building		10
Stream		
Percent Coverage		

Are there any other structures on this tract of land? no
 No. of single family dwellings _____ No. of manufactured homes _____
 Other (specify & number) _____

Does the property owner of this tract of land own any land that contains a manufactured home within five hundred feet of the tract listed above? Yes _____ No ✓

I hereby **CERTIFY** that the information contained herein is true to the best of my knowledge; and by accepting this permit shall in every respect conform to the terms of this application and to the provisions of the Statutes and Ordinances regulating development in Harnett County. Any **VIOLATION** of the terms above stated immediately **REVOKES** this **PERMIT**. I further understand this structure is not to be occupied until a **CERTIFICATE OF OCCUPANCY** is issued. This permit expires six months from date issued.

[Signature]
 Landowner's Signature
 (Or Authorized Agent)

3-20-98
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FOR OFFICE USE ONLY

Copy of recorded final plat of subdivision on file? ✓

Is the lot/tract specified above in compliance with the Harnett County Subdivision Ordinance? ✓

Watershed Ordinance? ✓
 Mobile Home Park Ord? ✓

ISSUED ✓

DENIED _____

Comments: _____

[Signature]
 zoning/watershed administrator

3-20-98
 Date

