

Pool house 1 500 301 19 R
 Pool Application # 11-50027323 R pd. 25.00

11-19-12
 Initial Application Date: 8-10-11

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
 Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Louades Pereda Mailing Address: 95 Timber Creek Ln
 City: Dunn State: NC Zip: 28334 Contact No: 910-489-5456 Email: _____

APPLICANT: Cap. Hl Pools + Spa Inc Mailing Address: PO Box 1189
 City: Garner State: NC Zip: 27529 Contact No: 919-669-9719 Email: Ben@Cap.HlPools.com
 *Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ben Lintz.com Phone # 919-669-9713

PROPERTY LOCATION: Subdivision: Myrtlewood Subd. Lot #: 33 Lot Size: 1 AC
 State Road # 421 State Road Name: US 421 Map Book & Page: 99, 195
 Parcel: 07.0588.0140.20 PIN: 0598.13.9603
 Zoning: R430 Flood Zone: X Watershed: N/A Deed Book & Page: 2004, 790 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size ___x___) # Bedrooms:___ # Baths:___ Basement(w/wo bath):___ Garage:___ Deck:___ Crawl Space:___ Slab:___ Slab:___
 (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
- Mod: (Size ___x___) # Bedrooms___ # Baths___ Basement (w/wo bath)___ Garage:___ Site Built Deck:___ On Frame___ Off Frame___
 (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:___
- Home Occupation: # Rooms:___ Use:___ Hours of Operation:___ #Employees:___
- Addition/Accessory/Other: (Size 18x36) Use: inground pool Closets in addition? () yes () no

Water Supply: County ___ Existing Well ___ New Well # of dwellings using well ___) *Must have operable water before final

Sewage Supply: ___ New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) ___ County Sewer

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: 1 Manufactured Homes: ___ Other (specify): proposed pool

Required Residential Property Line Setbacks:	Minimum	Actual
Front	35'	35'
Rear	25'	25'
Closest Side	10'	10'
Sidestreet/corner lot	20'	—
Nearest Building on same lot	10'	10'

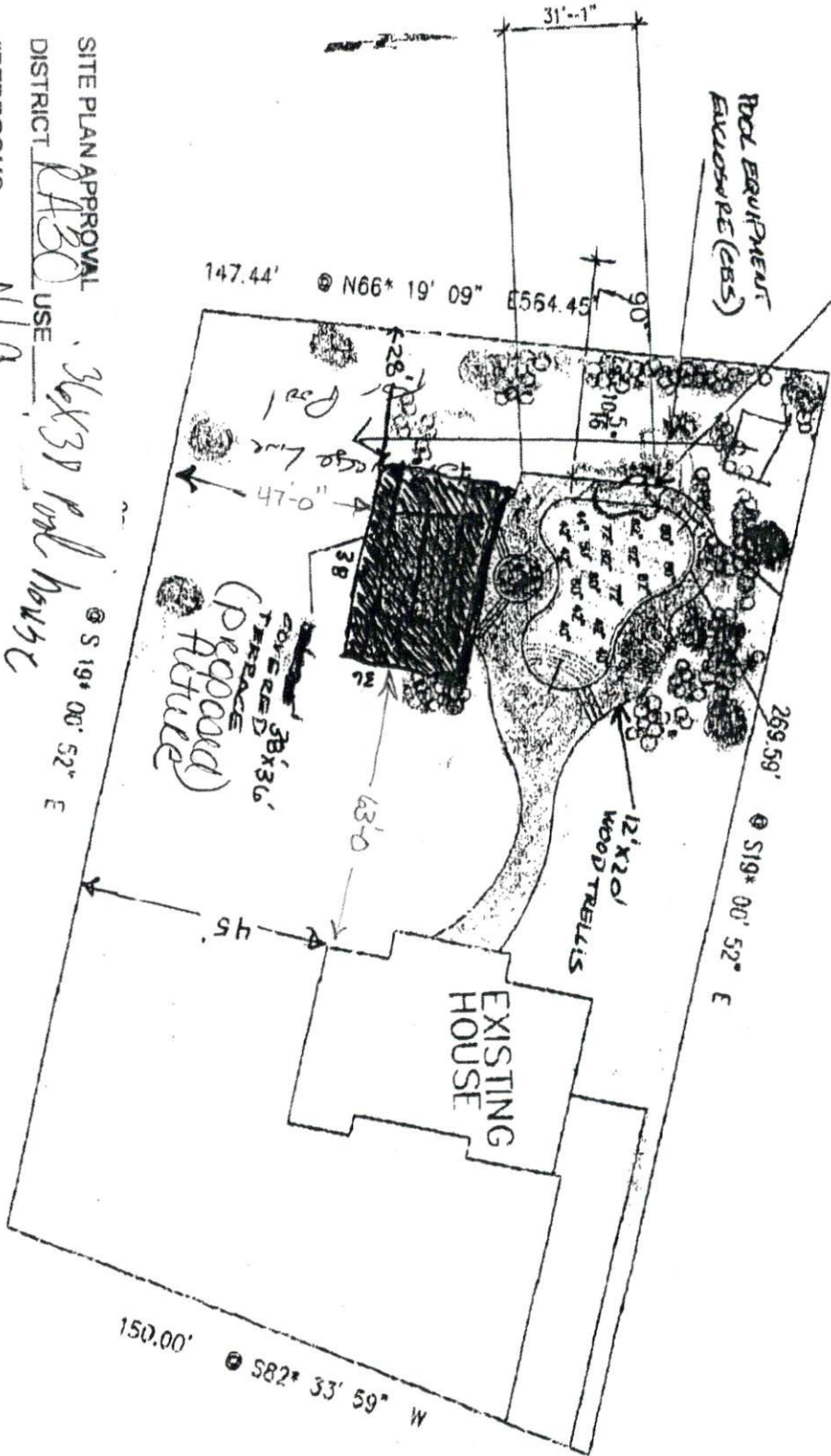
Comments: 11-19-12 Add Pool house to site plan. VCA

Rec'd 11/20/12 11/19/12 N

STONE STRUCTURE

LAYOUT START POINT (Derived from property line as shown)

POOL EQUIPMENT ENCLOSURE (EBS)



SITE PLAN APPROVAL
 DISTRICT RA30 USE 36x39 pool house
 #BEDROOMS N/A
W-19-12 W.C. B.W.
 JOINING ADMINISTRATOR

MARICA PEREDA POOL

URBANI OUTLETS,
 DESIGN CONSULTANTS, LLC.
 500 W. 10th Street, Ft. Lauderdale, FL 33304
 (954) 561-1111

POOL, DECK, AND LANDSCAPE PLAN

NOT TO SCALE

HTE 03-5-8503

H. HETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

17441

OPERATIONS PERMIT

Name: (owner) Bobby Byrd

New Installation Septic Tank

Property Location: SR# HWY 421

Repairs Nitrification Line

Subdivision Myrtlewood

Lot # 33

Tax ID # _____

Quadrant # _____

Contractor: Gerald Temple

Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: _____ ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other 25% Reduction System

Size of tank: Septic Tank: 1200 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 1800 in.

French Drain Required: - Linear feet

Date: 7-27-04

Inspected by: James E. Markham
Environmental Health Specialist

PERMIT NO. 20343

