· ·	Initial Application Date: 10 Mayo   100 Application #01- 30007037  H 10(3) CO Y OF HARNETT LAND USE APPLICATION OF THE PROPERTY OF THE PROPERT
	Planning Department 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793
	LANDOWNER: Chayles The Address: PB BX 639  City: DAVID State: NC Zip: 28368 Phone #: 919 499-1801  APPLICANT: State: NC Zip: 28368 Phone #: 919 499-1801  APPLICANT: State: NC Zip: 27501 Phone #: 919 639-3812  City: Address: Address: 310 BY Address: 310 B
	town. TACIA Dr. 15 on 18ft & 1st 15 4th on right.
	PROPOSED USE:  (_) Sg. Family Dwelling (Sizex) # of Bedrooms Basement Garage Deck
\	Multi-Family Dwelling No. Units No. Bedrooms/Unit  Manufactured Home (Size 50 ) # of Bedrooms Garage Deck
	Comments: 28 V6 4 3
\	Number of persons per household
•	(
	() Home Occupation (Size x ) # Rooms Use
	() Accessory Building (Sizex) Use
	Water Supply: ( ) County ( ) Well (No. dwellings ( ) Other
	Sewer: ( ) Septic Tank/ Existing: YES (NO) ( ) County ( ) Other
	Erosion & Sedimentation Control Plan Required? YES NO
	Structures on this tract of land: Single family dwellings Manufactured homes ther (specific)
	Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500°) of tractilisted above? YES
	Front 35 130 Rear 25 Actual Minimum Actual Minimum Actual Minimum Actual Front 35 130 130 Rear 25 160 160
	Side Corner O
	If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications or plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.
	3650 Olivare 4-20-01 919 12/35
	Signature of Applicant Pavid Hill  Date 12-3-02

HAT ETT COUNTY HEALTH DEPARTMENT Nº 18363
....PROVEMENT PERI Γο 5-2037

	Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."
	Name: (owner) New Installation Septic Tank
	Name: (owner) Septic Tank  Property Location: SR# N(27)  Repairs  New Installation Septic Tank  Repairs
	Subdivision Dopers Place Lot # 5
	Tax ID # Quadrant #
	Number of Bedrooms Proposed: $4(28 \times 80)$ Lot Size: 1.20 A(
	Basement with Plumbing: Garage:
	Water Supply:   Well  Public   Community
	Distance From Well: ft.
	Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.  Type of system:  Other
	Size of tank: Septic Tank: Doo gallons Pump Tank: gallons
	Subsurface No. of ditches exact length of each ditches ft. depth of the ditches in.
	French Drain Required: Linear feet
	Date: $(0,0)$
	This permit is subject to revocation if site  Signed:   Signed:
6	plans or intended use change.  Environmental Health Specialist
1	DRIVE
	13.
	DRIVE 1 DR ALDON
	1 you Willyam
11	35' 1 28x85 Change 75
1	Change 3
	155
	10 1
	NC
	30 / X400
'n	11- 110
1	5740 out Plunding shallow 18" out Otel Depth
	Maintain All set Backs keep Lines 15' from edge
	6 EASEMENT DO NOT DRIVE DR PARK DNIGHE
	SYSTEM

