Initial Application Date:

Application #

01-50003014

COUNTY OF HARNETT LAND USE APPLICATION

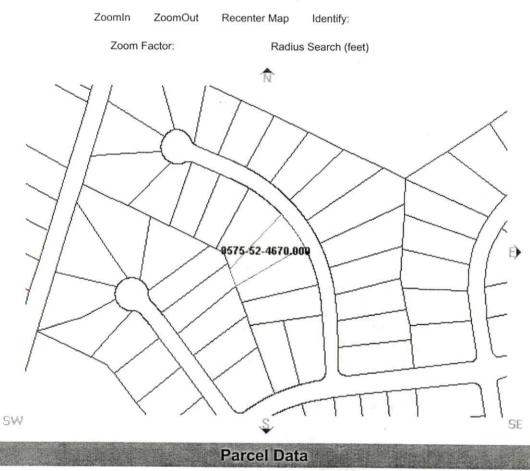
	D
Central	Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
LANDOWNER Kilarnold Corporation Mailing Address: 260 Calleview or
City: State: NC Zip: 2133 > Phone #: 0476 - 419-499-25
APPLICANT: Same as above Mailing Address: Cell-919-708-9834
City: State: Zip: Phone #: (City:
Priorie #. A CO
PROPERTY LOCATION: SR #: HUMAYW SR Name: HUMAYW CONNOWN WOOD
Parcel: 4515-03-0195-20 PIN: 4575-52-4670
Zoning: NA Subdivision: Heated VIIIage Lot #: 6-20 Lot Size: 5AC Flood Plain: Panel: Watershed: NA Deed Book/Page: CAV 32(0 Plat Pook/Page: Lot #: 6-20 Lot Size: 5AC
Tial Book Fage: F 101C
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hay 24 West in Johnsonaile
Mar law May to 81)
CHOKING CHIEGE)
PROPOSED USE:
Sg. Family Dwelling (Sizex) # of Bedrooms # Baths Basement (w/wo bath) Garage Deck
Multi-Family Dwelling No. Units No. Bedrooms/Unit
Manufactured Home (Size 16) # of Bedrooms Garage Deck StepS
Comments:
Number of persons per household
Type
The state of the s
Addition to Existing Building (Sizex) Use Other
Water Supply: County () Well (No. dwellings () Other
Sewage Supply: (New Septic Tank () Existing Septic Tank () County Sewer () Other
Erosion & Sedimentation Control Plan Required? YES NO
Manufactured homes V Other (specify)
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above?
Required Property Line Setbacks: Minimum Actual Front 35 50 Rear 25 (60)
Front 35 50 Rear 25 1(c0) 1 1 1 1
Side 10 15 Corner 20
15 Mary Mary Mary Mary Mary Mary Mary Mary
Nearest Building
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.
Wina. and Comba
Contractor Contractor
Jula 1000 1 9-17-01
Signature of Applicant Date
revolon trom old Land Vise
**This application expires 6 months from the date issued if no permits have been issued **

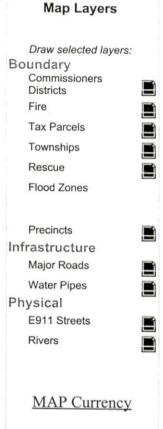


Click on the Map to:

Find Adjoining Parcels

- Account Number:000903610000
- Owner Name: KILARNOLD CORPORATION
- Owner/Address 1: HERITAGE VILLAGE
- Owner/Address 2: 38 INDEPENDENCE WAY
- Owner/Address 3:
- City, State Zip: CAMERON, NC 283260000
- · Commissioners District

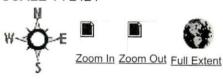
- PIN: 9575-52-4670.000
- Parcel ID: 09957503 0185 20
- Legal 1:LT#G-20 HERITAGE VIL PH 7
- Legal 2:SEC1 #F/731-C
- · Property Address: CONNECTICUT WY X
- · Assessed Acres: 1.00LT



This map is prepared for the inventory of real property found within this jurisdiction, and is compiled from recorded deeds, plats, and other public records and data. Users of this map are hereby notified that the aforementioned public primary information sources should be consulted for verification of the information contained on this map. The Harnett County. mapping, and software

- COMMINGUICHORD PIGNICE.
- · Voting Precinct:
- Census Tract:
- Flood Zone: XFirm Panel: 37085C0150D
- In Town:
- · Fire Ins. District:
- · School District:

SCALE 1: 2424



Reset Map

- Calculated Acres: .47
- Deed Book/Page: 01195/0928
- Deed Date: 1997/03/24
- · Revenue Stamps: \$.0
- Year Built: 1000
- Building Value: \$0.00
- Land Value: \$12,500.00
- Assessed Value: \$12,500.00

Reference Map



Click on map to Zoom to the location.

1:	Zoom To Scale
	Find An Address

	Parcel Query
Parcel Search	
PIN Ex.(0000-00-0000.000):	
Tax Parcel Number Ex.(000000 4-spaces 0000 00):	
Account Number:	
Owner Name Ex. (LAST FIRST):	
Go Get It!	
Advanced Query	

Harnett County, NC | Home | Contacts

companies assume no legal responsibility for the information contained on this map or in this website.

Data Effective Date:

8/22/2001 5:05:02 PM Current Date: 9/17/2001

Time: 5:05:46 PM

HARPETT COUNTY HEALTH DEPARTMP INT

Nº 13022

MPROVEMENT PE //IIT

tion of any building at which a septic tank system is to be used for diffrom the Harnett County Health Department."		
Name: (owner) Kil Arold Corp	New Installation	Septic Tank
Property Location: SR# HWY 24	Repairs	Nitrification Line
Subdivision Her. tage VIIAge	Lo	t#_ <i>Ga</i> 0
Tax ID #	Quadrant #	
Tax ID #	Lot Size: 20, 515	SSP+
Basement with Plumbing: Garage:		
Water Supply: Well Public Communit	у .	
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal sfinal approval.		
	unp to Gov.	
Size of tank: Septic Tank: 1000 gallons	Pump Tank: 1000 ga	llons
Subsurface No. of exact length of each ditch 100	width of ditches ft. d	epth of itches 18 in.
French Drain Required: Linear feet	11-19-97	
This permit is subject to revocation if site plans or intended use change.	Environmental Hea	alth Specialist
10 110	õ	19 15'
Si' LPP Rypin	D D 281	18 DRNE RC
	3B6	2 50° RC
10	148'	
10		
23,	2	9 15
18" Ditch Oapth		
ollow Contours		
Antan all Regulard set Backs		

Al HORIZATION TO C(STRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 13022. This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.		
Owner or Authorized Agent KIAROSICI CORP		
Name: Telephone #		
Address:		
Property Location: SR# HWY 24 Road Name		
New Installation Repair Septic Tank Nitrification Lines		
Subdivision Heritage Village Lot# 620		
Number of Bedrooms Proposed: 3 Lot size: 20, 515 5, A4		
Basement With Plumbing Without Plumbing		
Water Supply: Well Public Minimum Well Setback: ft.		
Type of System: Conventional Other		
Tank Volume: Septic Tank/OOO gallons Pump Chamber/OOO gallons		
Nitrification Field Specifications		
Number of fields Number of Lines per Field Length of lines		
Width of ditches 3 ft. Depth of ditches 18 inches		
French Drain: Linear feet required Depth of gravel		
No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the improvement permit and that a valid operations permit has been issued.		
Name: Date: 8-13-97		
Revised 2/96)CNSTRCT.WPD		



COUNTY OF HARNETT

Fee: 20°

007232 Permit:

Date: 7-9-9

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

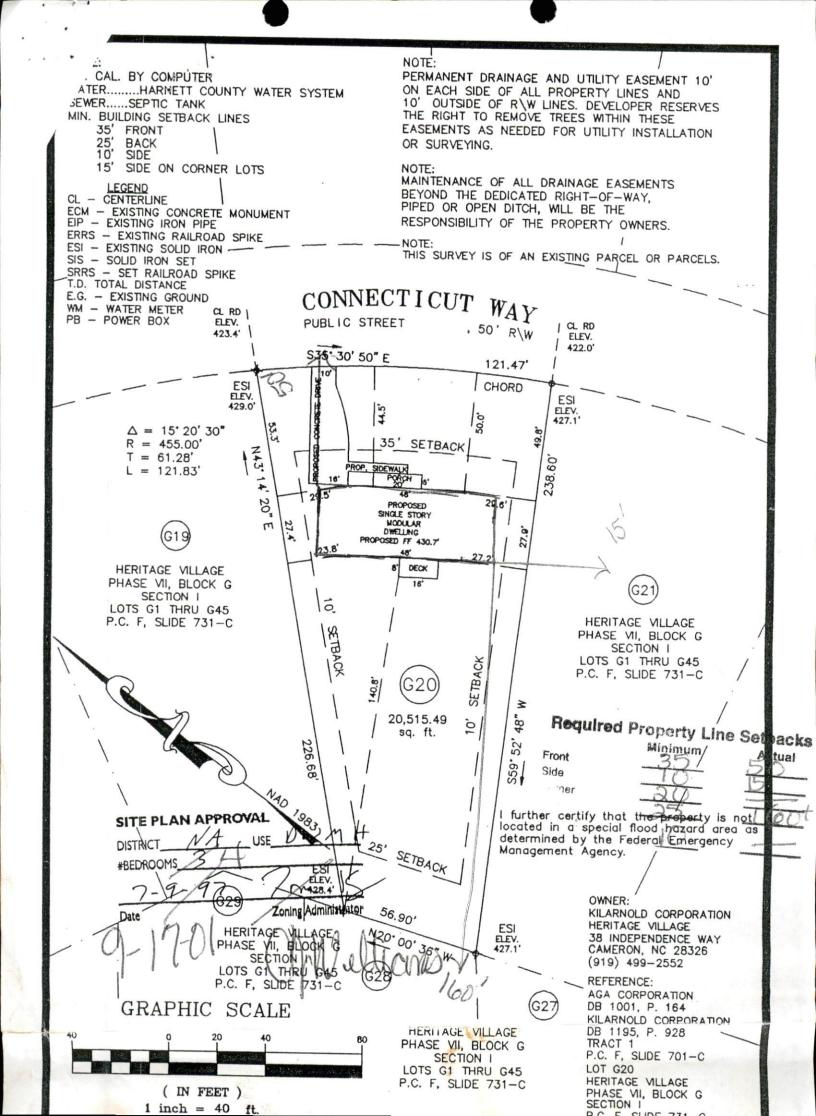
LANDOWNER INFORMATION:	APPLICANT INFORMATION:
NAME Kilarnold Corporation ADDRESS 5004 Independence Way Cameron NC 28326 PHONE (919) 499-2552	NAME Kilarnold Corporation— ADDRESS 5004 Independence Way Cameron, NC 28326 PHONE (919) 499-2552
PROPERTY LOCATION: Street Address Assigned	Connecticut Way
SR # NC 24 RD. NAME HWY 24 W TOWNS	
TAX MAP NO.9575(04)-60PARCEL NO.9284 F	FLOOD PLAIN X. PANELO150-D
SUBDIVISION Heritage Village PH VL BLF L	OT # CO OLOTITRACT SIZE
ZONING DISTRICT N/A	DEED BOOK 924 PAGE 326 ON FILE
WATSHED DIST. N/A WATER DIST. N/	A PLAT BOOK F PAGE 731-C
Give Directions to the Property from HWY 27 W To HWY 87 S, Turn onto HWY 24	Lillington:
PROPOSED () Sg Family Dwelling(Size _ x _)	# of Bedrooms Basement
Water Supply: (χ) County $(_)$ Well (Sewer: (χ) Septic Tank (Existing?Erosion & Sedimentation Control Plan Are there any wells not on this property line_NO_(show on Site Plan	NO_) (_; County (_) Other Required? YesNo_X lat but within 40 ft of the
*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, garages, driveways, decks, accessor buildings, well, and any wells within 40 feet of your property line.

A recorded deed and recorded plat are

SETBACK REQUIREMENTS Front property line	Actual M	Minimum/Maximum Required
Side property line	23	10
Corner side line		315 15
Rear Property Line	_140	25
Nearest building		10
Stream Percent Coverage		
rercerc coverage		
Are there any other struc	tures on this tr	ect of land?No
No. of single family dwel Other (specify & number)	11000 0 11-	
Does the property owner o	of this tract of	f land own any land that
		hundred feet of the tract
listed above? Yes	No_x_	the tract
I hereby CERTIFY that the	ind	
I hereby <u>CERTIFY</u> that the	information con	tained herein is true to
every respect conform to	the terms of the	ng this permit shall in
provisions of the Statute	e and Ordination	s application and to the
in Harnett County, Any	'UTOLATION -	regulating development
is issued. This permit exp	ares six months	from data for UCCUPANCY
10). He was	A MONTENIS	Trom date issued.
	~.	1-7-77
Landowner's Signature	/ I	Date
/ Jah Hacinizated Adeut)		. *
*********	*********	*****

FOR OFFICE USE ONLY		
Canada		
Copy of recorded final pla	t of subdivision	on file?
Is the lot/tract specified County Subdivision Ordinan	above in comp	Fiance with the Harnett
County Subdivision Ordinan Watershed Ordinance		-
Mobile Home Park Or	·	-
TODATE HOME PARK OF	0?	-
ISSUED	DENIED	*
	DENTED_	
Comments:		-
- Com		7-9-97
Zoning/Watershed Administr	ator	Date
C:\WP2\FORMS\PDLUPERM		23.6



480' U 12PP Repair 181 201