Initial Application Date: 1. 24-02

Revision

Application #

1-5003216

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

Signature of Applicant

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: KILARNOLD, CORP.	Mailing Address: 260 LAKEVIEW DRIVE
City: SANFORD State: NC	Zip: 27332 Phone #: 919-499-6313
APPLICANT: JUDITH L. SWEENER	Mailing Address: 125 PATSY LEMON LANE
City: LILLINGTON State: NC	Zip: 27546 Phone #: 919-498-0244
PROPERTY LOCATION: SR #: 24 SR Name:	
Parcel: 09-9575-03-0185-28	PIN: 9575-52-2466
Zoning: RA 20 R Subdivision: HERITAGE VILLAGE	Lot#: G28 Lot Size: - 41ac
Flood Plain: X Panel: 165 Watershed: NA DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Highway 2	Deed Book/Page: Otp Plat Book/Page: pcf 731c
24 go 2 miles to Heritage Village o	n right go to lot 28.
32 Willamsburg	Way
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 28x 58) # of Bedrooms 3 Garage	Deck <u>8X16</u>
Comments:	
Number of persons per household	
Business Sq. Ft. Retail Space	Туре
☐ Industry Sq. Ft	Type 1. Manufactured home must have a pitched roof.
Home Occupation (Sizex) # Rooms	Use 2. Manufactured home must have underpinning. 3. Moving apparatus must be removed, under
Accessory Building (Size x) Lise	Pinned, or landscaped.
7 Addition to Existing Dutiding (SizeX) Use	4. Steps 2&3 completed w/in 60 days of C.O.
Other	issuance.
Water Supply: (X) County () Well (No. dwellings)	() Other
Sewage Supply: (**) New Septic Tank (**) Existing Septic Tank (**)	County Sewer Other
Erosion & Sedimentation Control Plan Required? YES NO X Structures on this tract of land: Single family dwellings Manufactured	040
Manufactured Manufactured Manufactured	d homes 1 VV 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? YES NO X
Required Property Line Setbacks: Minimum Actual	Minimum Actual
Front <u>35</u> 50	Rear 25 163
Side 10 10'	Corner 20
Nearest Building 10 NA	
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.
hereby swear that the foregoing statements are accurate and correct to the best of my	v knowledge
A section in	,
11111 A11100 101	M . O . O .

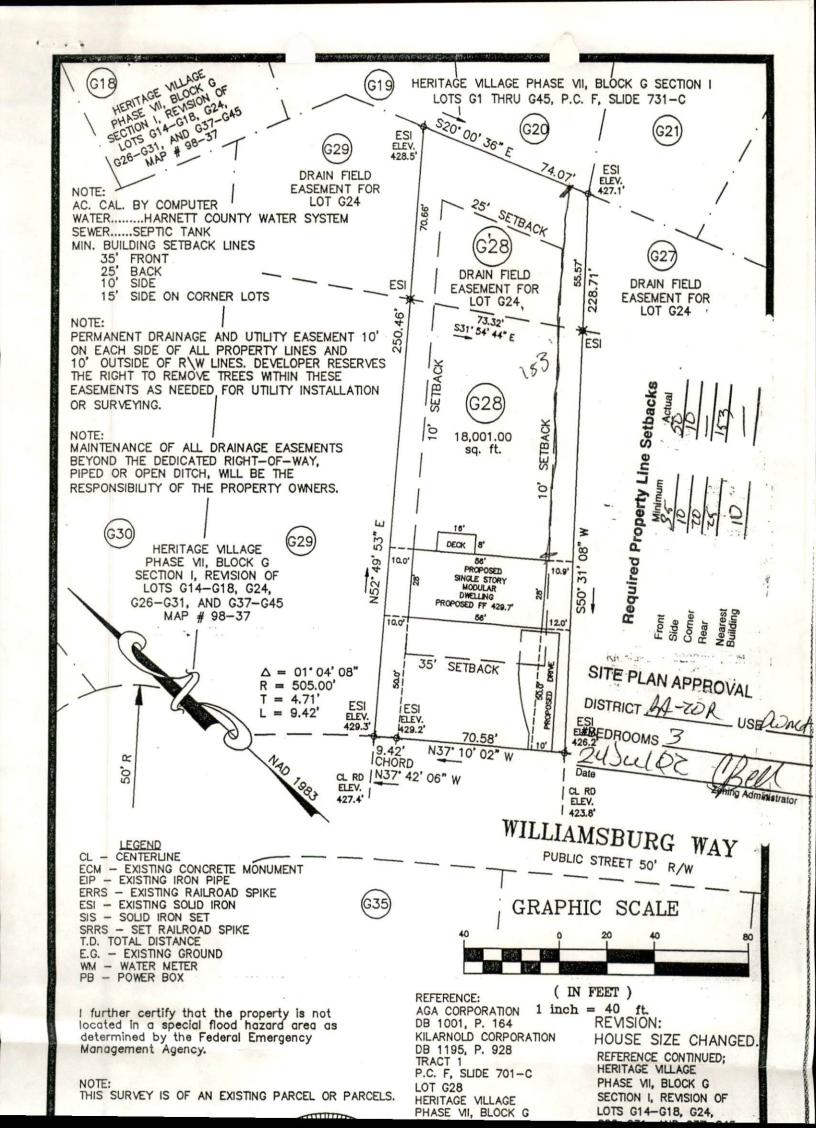
**This application expires 6 months from the date issued if no permits have been issued **

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Nº 13050

HARNETT COUNTY HEALTH DEPARTMENT MPROVEMENT PERMIT

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) Kil Apold Corp New Installation Septic Tank Property Location: Repairs Nitrification Line Her. taxe VIII Ase Subdivision Tax ID #_ - Quadrant # . Lot Size: 18,001 & ft Number of Bedrooms Proposed: Basement with Plumbing: Garage: Water Supply: ☐ Well ☐ Public ☐ Community Distance From Well: 50min ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other ___ Septic Tank: 1000 gallons Size of tank: Pump Tank: _____ gallons Subsurface exact length of width of depth of depth of ft. ditches 18-24 in. No. of Drainage Field ditches_ French Drain Required: Linear feet Date: Environmental Health Specialist This permit is subject to revocation if site plans or intended use change. 250 EASEMENT 15 90 10 28×48 ZBL 74 70 LPP Repair 15 228 STUB Out Plumbing shallow 18-24" Dth Dpth Follow Contours Maintain all required set Backs treep Drain Lines 10 Fram Easement Line



HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION, PO BOX 09, LILLINGTON, NC 893-7547 APPLICATION FOR IMPROVEMENT PERMIT

DATE NAME KILARNOLD CORPORATION TELEPHONE NO. 919-499-2552 ADDRESS(current) 5004 Independence Way, Cameron, NC 28326 PROPERTY OWNER KILARNOLD CORPORATION SUBDIVISION NAME HERITAGE VILLAGE LOT NO. _ PROPERTY ADDRESS _____ STATE RD. NO. DO YOU HAVE A LEGAL DEED TO THIS PROPERTY ? YES__ PLEASE SHOW A PURCHASE AGREEMENT OR AUTHORIZATION OF AUTHORITY IF NO EXPLAIN DIRECTIONS High way 24 past highway 87 West of intersection .7 miles on left SIZE OF LOT OR TRACT Lots 20,000 square feet or better Type of dwelling DW Basement with plumbing NO Number of Bedrooms 3 Garage____ 2. 3. Dishwasher YES Garbage Disposal_ NO WATER SUPPLY - PRIVATE WELL ___ COMMUNITY SYSTEM ___ COUNTY X A <u>plot plan</u> must be attached to this application showing: 1) Setting of dwelling, 2) Desired placement of septic tank system and 3) Well placement. Place stakes at the exact location of dwelling and at each corner of lot. An on site inspection must be made, which consists of a soil evaluation. A zoning permit must be obtained from the Planning Department before an improvement permit can be issued by this department. This certifies that all the above information is correct to the best of my knowledge and any false information will result in the denial of permit. Once the permit is issued, the permit is good for a period of 5 years. The permit is subject to revocation if site plans or the intended use change. KILARNOLD CORPORATION

Signature of Owner BY:

Revised (3-93) or Authorized Agent ONLY.

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COUNTY OF HARNE __ 007240

Receipt: Permit:

Date: 7-9-

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			
	iamsburg Way			
	TOWNSHIP 09 FIRE RESCUE PLIT . PANEL0150-D			
	BLE LOT # CASLOT/TRACT SIZE			
ZONING DISTRICT N/A	DEED BOOK 924 PAGE 326 ON FILE			
WATSHED DIST. N/A WATER DIST	. N/A PLAT BOOK PAGE			
Give Directions to the Property from Lillington: HWY 27 W To HWY 87 S, Turn onto HWY 24 W, Left into Heritage Village				
(_) Sg Family Dwelling(Sizex Garage Deck (_) Multi-Family Dwelling No. (X) Manufactured Home(Size 28 x 16 x 1				
Erosion & Sedimentation Control Are there any wells not on t property line NO (show on Sit	ell (No. dwellings) (_) Other ng?NO_) (_) County (_) Other Plan Required? YesNo_X his lot but within 40 ft of the e Plan). ached to this Application, drawn ,			
to scale on an 8.5 by 13	ages, driveways, decks, accessory wells within 40 feet of your			

A recorded deed and recorded plat are

property line.

SETBACK REQUIREMENTS Front property line Side property line Corner side line Rear Property Line Nearest building Stream Percent Coverage	Actual Yu 15 145	Minimum/Maximum	Required
Are there any other struction No. of single family dwell Other (specify & number)_	linne () No	tract of land? of manufactured	No homes 1
Does the property owner contains a manufactured he listed above? Yes		of land own any e hundred feet of	land that the tract
I hereby <u>CERTIFY</u> that the the best of my knowledge; every respect conform to provisions of the Statute in Harnett County. Any immediately REVOKES this structure is not to be ocis issued. This permit explanation of the Statute in Harnett County. Any immediately REVOKES this structure is not to be ocis issued. This permit explanation of the statute	the terms of the t	this application ces regulating de the terms abo	shall in and to the evelopment ve stated this
**********	********	********	******
FOR OFFICE USE ONLY	,		
Copy of recorded final pla	it of subdivis:	ion on file ?	
Is the lot/tract specified County Subdivision Ordinan Watershed Ordinance Mobile Home Park Or	d above in co	mpliance with th	e Harnett
ISSUED	DENIE	ED	×
Comments:			
Shawitandar crul Zoning/Watershed Administra	ator	7.9.97	-1

C:\WP2\FORMS\PDLUPERM

