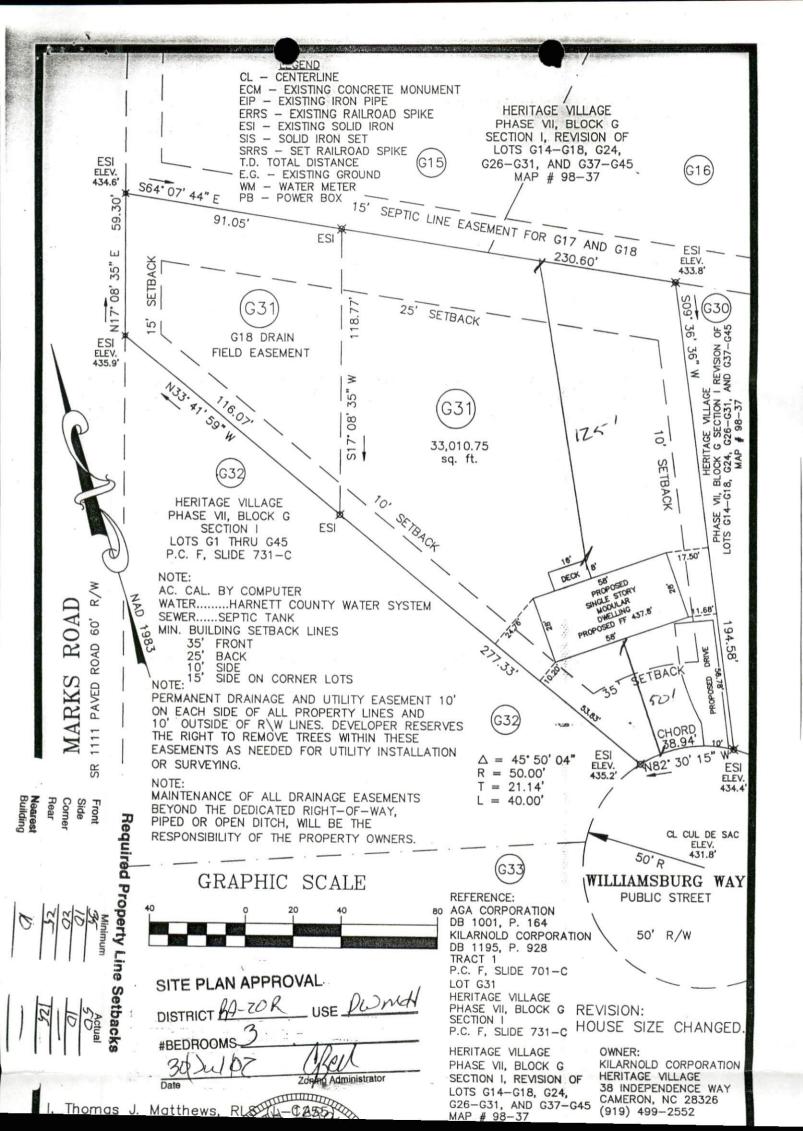
COUNTY OF HARNETT LAND USE APPLICATION

	Central Permitting 102 E. Front Street, Lillington, NC 27	546 Phone: (910) 893-4759 Fax: (910) 893-2793
LA	LANDOWNER: KILARNOLD, CORP.	failing Address 260 I AVEVIEW DRIVE
Cit	City: SANFORD State: NC	Zip: 27332 Phone #: 919-499-6313
	R	1 Holica, 313 133-0313
AP	APPLICANT: JUDITH L. SWEENER	failing Address: 125 PATSY LEMON LANE
Cit	City: LILLINGTON State: NC	Zip: 27546 Phone #: 919-498-0244
	· ·	
PR	PROPERTY LOCATION: SR #: 24 SR Name:	
Par	Parcel: 09-9575-03-0185-31 PIN:	9575-52-0627
Zor	Coning: RA 20 R Subdivision: HERITAGE VILLAGE	Lot #: G31 Lot Size: .76ac.
Flo	Flood Plain: X Panel: 165 Watershed: NA	Deed Book/Page: Ot.p Plat Book/Page: pcf 731c
7	Speciale	
DIF	DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Highway 27	to Johnsonville turn left on 24
	go 2 miles to Heritage Village on	right go to lot 31.
-	Go VICILIA	. 46
nn.	PROPOSED USE:	burg Way
	ROPOSED USE:	
_	, 2 day	Basement (w/wo bath) Garage Deck
Ø		
0.50	Comments:	Deck 8X16
		· · · · · · · · · · · · · · · · · · ·
	Business Sq. Ft. Retail Space	Туре
		Type 1. Manufactured home must have a pitched roof.
	Home Occupation (Sizex) # Rooms	lice 2. Wallulaciured nome must have under the
		Moving apparatus must be removed, under
	(5.65	4. Steps 2&3 completed w/in 60 days of 6.0
		issuance.
	/ater Supply: () Well (No. dwellings)	
	ewage Supply: (X) New Septic Tank () Existing Septic Tank () Co	unty Sewer () Other
	rosion & Sedimentation Control Plan Required? YES NO X	
Stru	tructures on this tract of land: Single family dwellings Manufactured ho	mes 1 per Other (specify)
	roperty owner of this tract of land own land that contains a manufactured home w/in f	ive hundred feet (500') of tract listed above? YES NO X
Req	equired Property Line Setbacks: Minimum Actual	Minimum Actual
	Front 35 5D	Rear 25 125
	Side 10 iV	Corner 20
8	Nearest Building 10 NA	
	TVA	

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.

7-10-02

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



HARNETT COUNTY HEALTH DEPARTMENT

Nº 12533

IPROVEMENT PEF....IT

	Be it ordained by the Harnett County Board of Health as follows: Section of any building at which a septic tank system is to be used for disposal from the Harnett County Health Department."	of sewage without first	obtaining a written permit
	Name: (owner) Kilarnold Corp	☑ New Installation	Septic Tank
	Name: (owner) Kilarnold Corp Property Location: SR#_HWY ay [Repairs	Nitrification Line
	Subdivision Her. tage V. Mage	Lo	t# G-31
	Tax ID #	Quadrant #	
	Tax ID #	ize: 33,010 3	ss ft
	Basement with Plumbing: Garage:	,	
	Water Supply: Well Public Community		
	Distance From Well: 50mn ft.		
	Following is the minimum specifications for sewage disposal system inal approval. Type of system: Conventional Other		
	_		
	ganons Pump	Tank: gal	llons
	Subsurface No. of exact length of each ditch 200 ft. d	vidth of de	epth of
	French Drain Required: Linear feet	itelies It. di	itches 1321 in.
	Date: 8 20	0-97	
	This permit is subject to revocation if site	POLIARI	
	plans or intended use change.	Environmental Heal	lth Specialist
		194.	
5	THAY AND I STORY WAS A STORY OF THE PARTY OF	10	
	TUB OUT		
	ab cert	15	1
	umbing shills 277 10 28th my	300	
	24" O.tch Opths 277	Colyre	
	ollow contours	/ \ \ \ \	
	Maintain All Piguined set Backs 15	50 6	\mathcal{Y}
	The state of the s		
		Williams burg	WAT
		1 (311)	

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

NAME ADDR

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 LOT NO				
PROPERTY ADDRESS STATE RD. NO				
DO YOU HAVE A LEGAL DEED TO THIS PROPERTY ? YES IF NO 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				
1. Type of dwelling DW Basement with plumbing NO 2. Number of Bedrooms 3 Garage NO 3. Dishwasher YES 4. 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				

Revised (3-93) or Authorized Agent ONLY.



COUNTY OF HARNE_ I

007243 Permit:___

Receipt:____

Date: 7.9.0

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

THE CHAIR DECEMENT OF THE PERSON OF	THIRD COL . LIVING	
LANDOWNER INFORMATION:	APPLICANT INFORMATION:	
ADDRESS_5004 Independence Way	NAME Kilarnold Corporation ADDRESS 5004 Independence Way Cameron, NC 28326 PHONE (919) 499-2552	
Street Address Assigned William	sburg Way	
SR # NC 24 RD. NAME HWY 24 W TOWNSH	HIP 09 FIRE RESCUE	
TAX MAP NO.9575(04)-60PARCEL NO.9284 FL		
SUBDIVISION Heritage Village PH VL BLF LO	T # 63 LOT/TRACT SIZE	
ZONING DISTRICT N/A DE	EED BOOK 924 PAGE 326 ON FIL	
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		
PROPOSED US (_) Sg Family Dwelling(Sizex) # Garage Deck	of BedroomsBasement(sizex)No. Bedrooms/unit of Bedrooms_3	
(_) other		
Water Supply: (x) County (_) Well (N Sewer: (x_) Septic Tank (Existing?_N(Erosion & Sedimentation Control Plan Are there any wells not on this loproperty line_NO_(show on Site Plan *NOTE: A Site Plan must be attached to scale on an 8.5 by 11 sheet proposed buildings, garages, buildings, well, and any well: property line.	O_) (_; County (_) Other Required? Yes No_X ot but within 40 ft of the i). to this Application, drawn t, showing: existing and driveways, decks, accessory	

A recorded deed and recorded plat are

SETBACK REQUIREMENTS Front property line Side property line Corner side line Rear Property Line Nearest building Stream Percent Coverage Are there any other structures No. of single family dwellings	on this tract of land? No
Other (specify & number)	
Does the property owner of thi contains a manufactured home wi listed above? Yes No_X	s tract of land own any land that thin five hundred feet of the tract
every respect conform to the te provisions of the Statutes and in Harnett County. Any VIOLA immediately REVOKES this PER	until - CEPTTETETE
*********	***********
FOR OFFICE USE ONLY	*********
	•
Copy of recorded final plat of s	subdivision on file ?
Is the lot/tract specified abov County Subdivision Ordinance? Watershed Ordinance? Mobile Home Park Ord?	e in compliance with the Harnett
ISSUED	DENIED
Comments:	
Zoning/Watershed Administrator	7.9.97 Date

C:\WP2\FORMS\PDLUPERM

