

Initial Application Date: 3-9-04

Application # 0550008917

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

# 854 (a Revision) + name change + HTE # changed

LANDOWNER: Clyde Patterson Mailing Address: 4271 Leaflet Church Rd  
City: BROADWAY State: NC Zip: 27505 Phone #: \_\_\_\_\_

APPLICANT: Calvin Simpson Mailing Address: 25 TAIL OAKS Dr.  
City: SPRING LAKE State: NC Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

PROPERTY LOCATION: SR #: 2048 SR Name: Bethel Baptist / TAIL OAKS  
Parcel: 01 0534 0102 01 PIN: 0524-64-9455.000  
Zoning: RA20M Subdivision: TAIL OAKS S/D Lot #: 1 Lot Size: 1.72 AC  
Flood Plain: X Parcel: 155 Watershed: N/A Deed Book/Page: 1772/195 Plat Book/Page: 2603-541

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE HWY 210 SOUTH FOR APPROX. 13 MILES TURN LEFT ONTO Bethel Baptist Rd GO APPROX. 1.5 MILES TURN LEFT ONTO TAIL OAKS Dr. FIRST LOT ON LEFT.

PROPOSED USE: MODULAR  
 Sg. Family Dwelling (Size 30 x 76) # of Bedrooms 4 # Baths 2 Basement (w/wo bath) \_\_\_\_\_ Garage \_\_\_\_\_ Deck \_\_\_\_\_  
 Multi-Family Dwelling No. Units \_\_\_\_\_ No. Bedrooms/Unit \_\_\_\_\_  
 Manufactured Home (Size \_\_\_\_\_ x \_\_\_\_\_) # of Bedrooms \_\_\_\_\_ Garage \_\_\_\_\_ Deck \_\_\_\_\_

Comments: \_\_\_\_\_  
 Number of persons per household 2  
 Business Sq. Ft. Retail Space \_\_\_\_\_ Type \_\_\_\_\_  
 Industry Sq. Ft. \_\_\_\_\_ Type \_\_\_\_\_  
 Home Occupation (Size \_\_\_\_\_ x \_\_\_\_\_) # Rooms \_\_\_\_\_ Use \_\_\_\_\_  
 Accessory Building (Size \_\_\_\_\_ x \_\_\_\_\_) Use \_\_\_\_\_  
 Addition to Existing Building (Size \_\_\_\_\_ x \_\_\_\_\_) 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  PROPOSED  
Structures on this tract of land: Single family dwellings \_\_\_\_\_ Manufactured homes 1 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

Required Property Line Setbacks:	Minimum	Actual	Minimum	Actual
Front	<u>35</u>	<u>70</u>	Rear	<u>25</u> <u>200</u>
Side	<u>10</u>	<u>30</u>	Corner	<u>20</u> <u>-</u>
Nearest Building	<u>10</u>	<u>-</u>		

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 knowledge.

[Signature]  
Signature of Owner or Owner's Agent

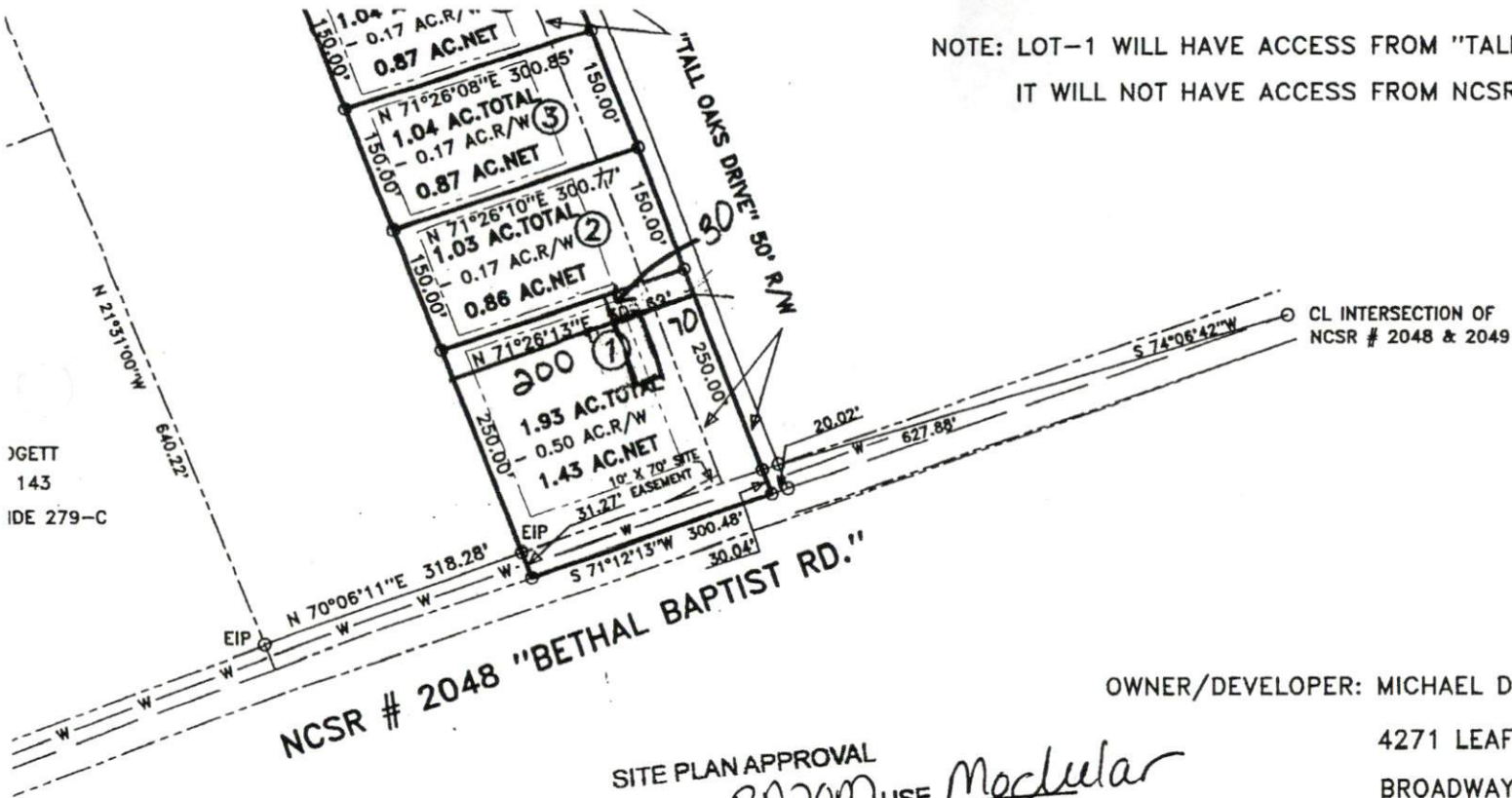
3-4-04  
Date

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

A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE PERMIT

854 3/10/04 S

NOTE: LOT-1 WILL HAVE ACCESS FROM "TALL OAKS DR." ONLY  
IT WILL NOT HAVE ACCESS FROM NCSR # 2048.



GETT  
143  
IDE 279-C

NCSR # 2048 "BETHAL BAPTIST RD."

OWNER/DEVELOPER: MICHAEL D. EAKERS

4271 LEAFLET CHURCH RD.

BROADWAY, NC 27505

919-258-5538

SITE PLAN APPROVAL

DISTRICT RA20M USE Modular

#BEDROOMS 4

3-9-04

ZONING ADMINISTRATOR

SURVEY FOR:

"TALL OAKS SUBDIVISION"

**BENNETT SURVEYS, INC.**

1662 CLARK RD., LILLINGTON, N.C. 27546

(910) 893-5252

TOWNSHIP ANDERSON CREEK

COUNTY HARNETT

100 0 200

SURVEYED BY: JRM

FIELD BOOK  
DC # 1

STATE: NORTH CAROLINA

DATE: MAY 20, 2003

SCALE: 1" = 200'

DRAWN BY: RVB

DRAWING

ZONE RA-20M

TAX PARCEL ID#: 01-0534-0102

CHECKED & CLOSURE BY: MRB

02187

# HARNETT COUNTY HEALTH DEPARTMENT IMPROVEMENT PERMIT

No 20088

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) CHARLES DENT  New Installation  Septic Tank  
Property Location: SR# 8048 BENELE BAPTIST RD  Repairs  Nitrification Line

Subdivision TALL OAKS Lot # 1

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 4 Lot Size: 1.43 ac

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:  Conventional  Other \_\_\_\_\_

Size of tank: Septic Tank: 1000 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 12-15 in. <sup>\* SEE BELOW</sup>

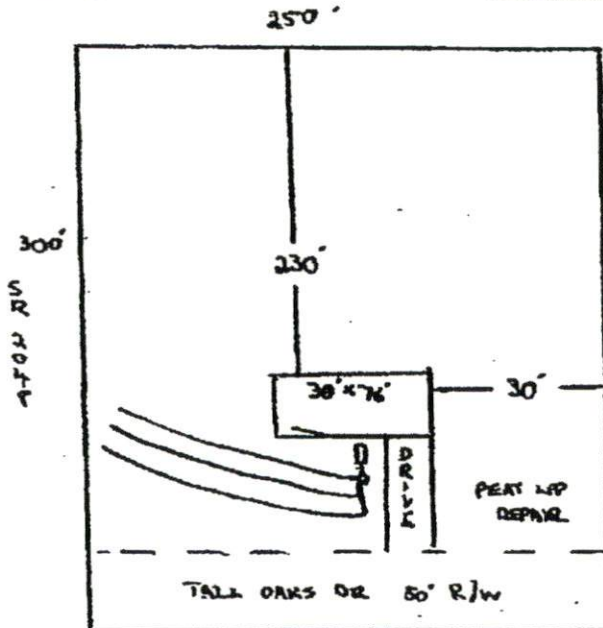
French Drain Required: \_\_\_\_\_ Linear feet

This permit is subject to revocation if site plans or intended use change.

Date: 6/17/03

Signed: [Signature] RS (OLIVER TOLSON)  
Environmental Health Specialist

DRAWING NTS



- \* MAINTAIN ALL SETBACKS
- \* FURTHEST LINE FROM HOUSE TO STRUCK AT 15" DEEP.
- \* TANK TO SIT ABOVE GRADE. IF TANK IS SET TOO DEEP A PUMP WILL BE REQUIRED.
- \* CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION
- \* MINIMUM OF 6" OF COVER NEEDED OVER ENTIRE SITE

No wastewater system shall be covered or placed into use by any person until an inspection by the Harriet 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.

Signature of Authorized Agent for Harriet County of Harriet *[Signature]*  
 Date 3/17/03

French Drain: Linear feet required \_\_\_\_\_ ft. Depth of gravel \_\_\_\_\_ inches  
 Width of ditches 3 ft. Depth of ditches 12-15 inches  
 Number of fields 1 # of lines per field 3 Length of lines 100 ft.

**NITRIFICATION FIELD SPECIFICATIONS**

Septic Tank 1000 gal Pump Chamber gal  
 Water Supply:  Well  Public Water Supply Minimum Well Spacing 100 ft.  
 Basement  With Plumbing  Without Plumbing  
 Conventional  Other  
 New Installation  Repair  Septic Tank  Nitrification Lines

**TYPE OF SYSTEM**

Subdivision Twp Oaks Lot # 4 # Bedrooms Proposed 4 Lot Size 1.43 ac  
 Property Location SR# 2078 Road Name BETH BAPTIST RD  
 Address PO Box 35595 FAYETTEVILLE NC 28303  
 Name CHARLES DEAN Telephone 850-6572

Authorization is hereby given to construct a wastewater system to the specifications described by Harriet County Health Department, Improvement Permit # 20088. 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.

**HARRIET COUNTY HEALTH DEPARTMENT  
 AUTHORIZATION TO CONSTRUCT**