

JW

Initial Application Date: 08/10/2004
11-30-04

Application # 04-5-10140R

COUNTY OF HARNETT LAND USE APPLICATION
Central Permitting 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793

LANDOWNER: Steve Thomas Mailing Address: PO Box 875
City: Broadway State: NC Zip: 27505 Phone #: 919 906 4069

APPLICANT: Steve Thomas Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: _____ SR Name: _____

Address: 145 Ridgeford Lane

Parcel: 1390950014 71 PIN: 91091-710-31810.000

Zoning: RA30 Subdivision: Hollies Dines Lot #: 4 Lot Size: 2.54

Flood Plain: Y Panel: 0075 Watershed: N/A Deed Book/Page: 18871457 Plat Book/Page: 2003-259

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 North turn right on Holly Springs Church Rd. then left on Hollies Dines Rd. Then right on Ridgeford Ln. let at end of street on left

PROPOSED USE:

Sg. Family Dwelling (Size 16x32) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) _____ Garage NA Deck NA

Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____

Manufactured Home (Size 16x32) # of Bedrooms 3 Garage NA Deck NA

Number of persons per household _____

Business Sq. Ft. Retail Space _____ Type _____

Industry Sq. Ft. _____ Type _____

Church Seating Capacity _____ Kitchen _____

Home Occupation (Size _____ x _____) # Rooms _____ Use _____

Additional Information: _____

Accessory Building (Size _____ x _____) Use _____

Addition to Existing Building (Size _____ x _____) Use _____

Other _____

Additional Information: _____

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

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

Structures on this tract of land: Single family dwellings _____ Manufactured homes 1 Other (specify) _____

Required Residential Property Line Setbacks:	Minimum	Actual
Front	35	<u>50'</u>
Rear	25	<u>10'</u>
Side	10	<u>100'</u>
Corner	20	<u>1'</u>
Nearest Building	10	<u>1'</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. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Steve Thomas
Signature of Owner or Owner's Agent

8-16-04
Date

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

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

86/04
IVR 11/30S

FRONT YARD ----- 35'
 REAR YARD ----- 25'
 SIDE YARD ----- 10'
 CORNER LOT SIDE YARD -- 20'
 MAXIMUM HEIGHT ----- 35'

SITE PLAN APPROVAL

DISTRICT RA3D USE DW4H

#BEDROOMS 3

David Taylor
 Date Zoning Administrator

San Thomas
 8-16-04
 11-30-04

NOTE: ALL CORNERS ARE NEW
 IRON STAKES UNLESS OTHERWISE NOTED.

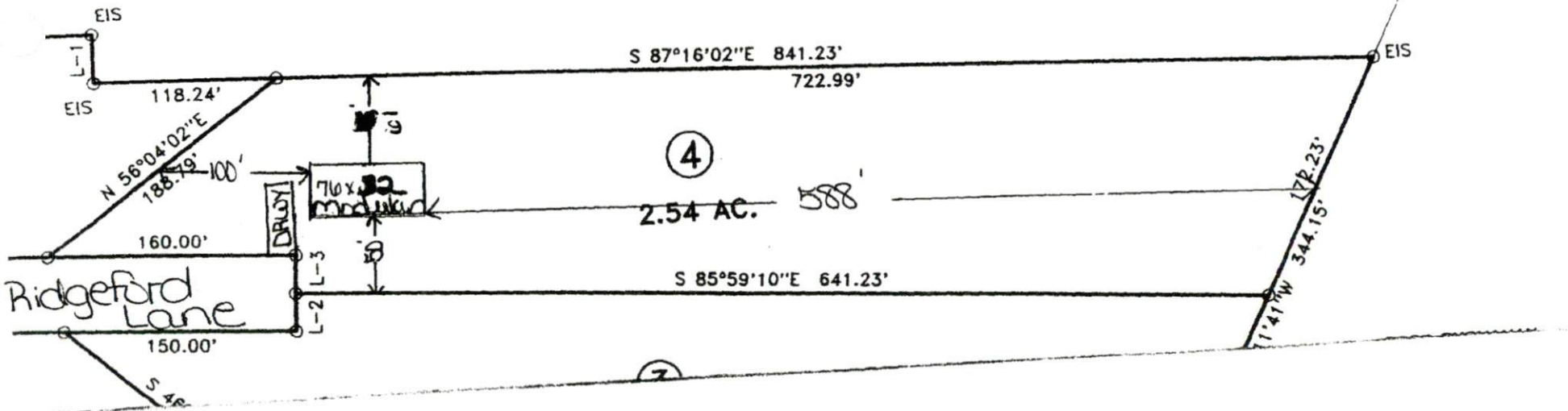
[Signature]

MAGNETIC NORTH
 MAP NO. 2001-1378

COURSE	BEARING	DISTANCE
L-1	S 02°42'15"W	32.00'
L-2	N 03°58'53"E	25.00'
L-3	N 03°58'53"E	25.00'

DAVID TAYLOR
 DB 1578, PG 850
 MAP NO. 2001-1378

10.01 AC. TOTAL



HTE 04-5-10140

IMPROVEMENT PERMIT

20895

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) Steve Thomas New Installation Septic Tank
Property Location: SR# 1270 Hollies Pine Repairs Nitrification Line

Subdivision Hollies Pine Lot # 4

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (28x76) Lot Size: 2.54 AC

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 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 1 exact length of each ditch 540 ft. width of ditches 3 ft. depth of ditches 18 in.

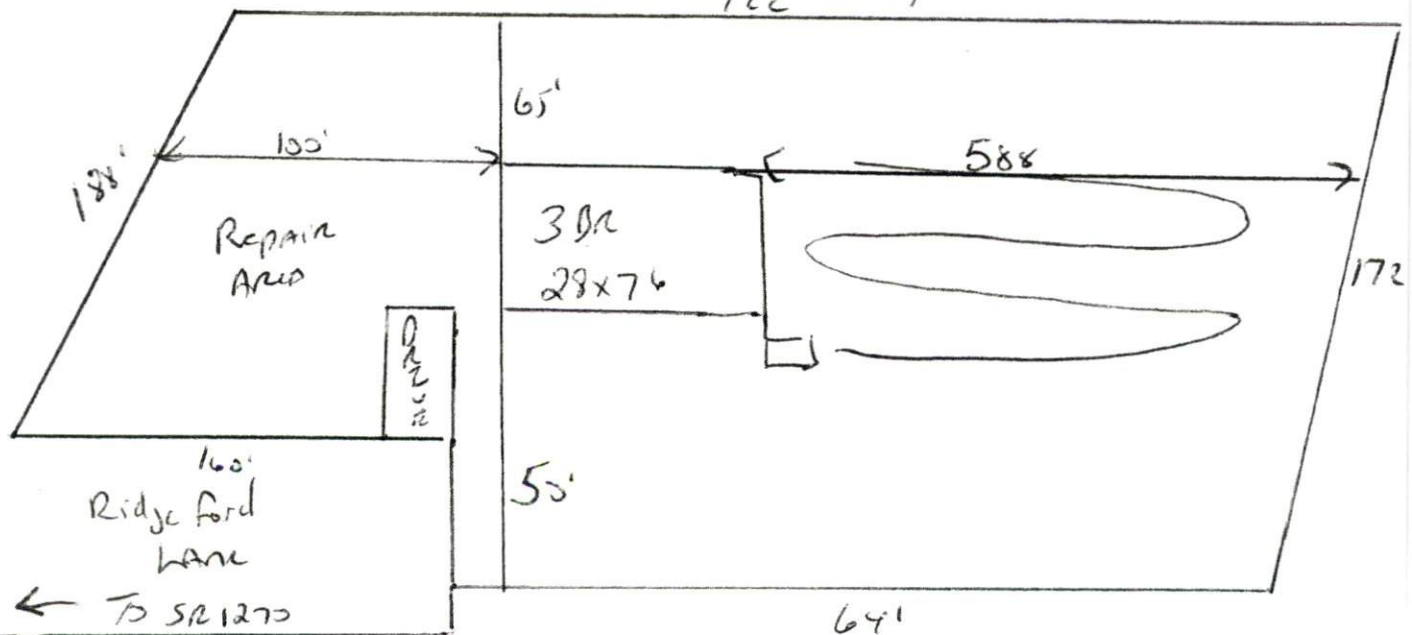
French Drain Required: _____ Linear feet

Date: 08-23-04

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

Signed: [Signature]
Environmental Health Specialist

722



Meet onsite Before Installing
Main Tank all set back

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 20895. 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.*

Steve Thomas
Name _____ Telephone # _____

Address _____

1270
Property Location SR# _____

Hollis Pines 4 3(28x74) 2.54M
Subdivision Lot # # Bedrooms Proposed Road Name Lot Size

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines
 Conventional [] Other _____

[] Basement [] With Plumbing [] Without Plumbing

Water Supply: [] Well Public Water Supply Minimum Well Setback: 50 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 540 Ft.

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.

Joe West RS
Signature of Authorized Agent for Harnett County

08-23-04
Date