9-15-11

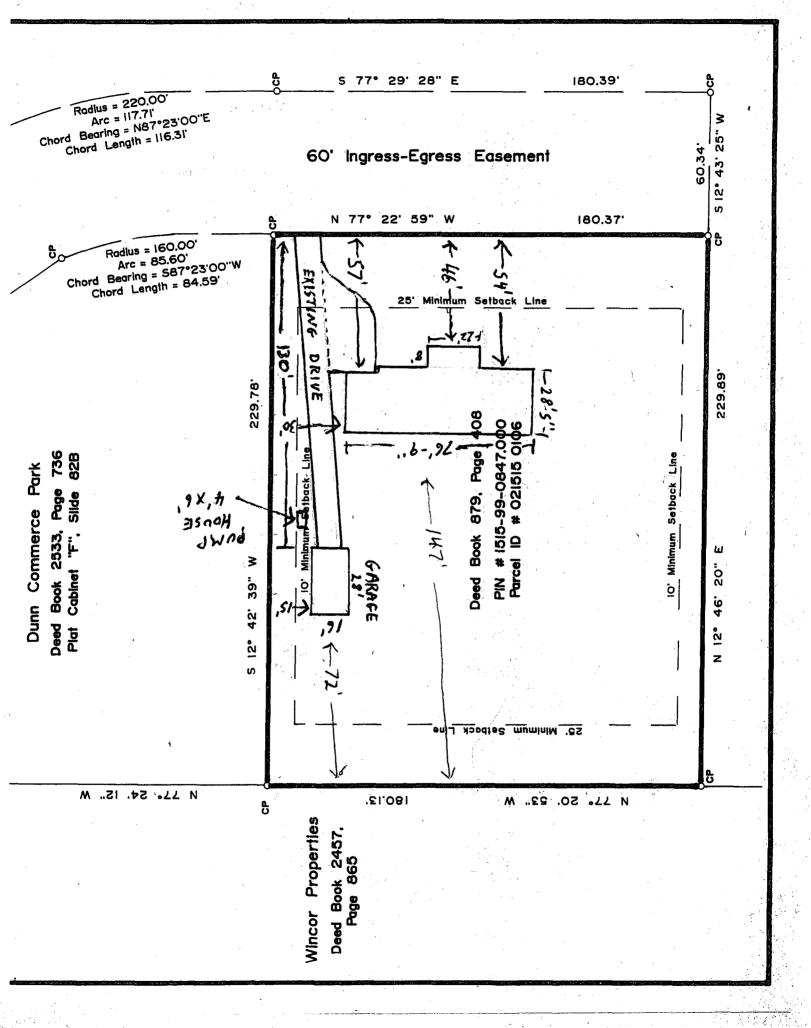
Application # 11500 27540

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Environmental Health Bornian

Application for Environmental Health Permit in Towns/Areas Zoned by Municipalities

Land	Owner Information:		Applicant Information:	
Name	e: shirley Mckor		Name: J A Johnson Construction + Custon	1 tomes +
Addre	OSS: 115 Pope Rd. Dun NC Z8334	<i></i>	Address: 173 Friendship In	
Ohon	Jun 10 2838		FINITH NC 28339	
FIION	1e: 910-891-1667		Phone: 119-820-1438	
Prope	erty Location:			
		Rd Dum NC	28734	
PIN c	or Parcel Number: 15/5	99-0847,000	28334 1021515 0104	
Subd	ivision:		Lot Number:	
Lot S	izo: , 95 Acres	Zoning:	20 Power Co:	
Speci Cxi lef	ific Directions to Job from to next exit (taffer motel,	Lillington: 421-500 Pope Bd) Turn Job site on	Lot Number: 20 Power Co: The forman furman 95 routh. West + go over 95. It	
Propo	osed Use:			
W	Single Family Dwelling Basement: Basement	(Size: <u>76</u> x <u>2</u> sement w/ Plumbing:	28') # of Bedrooms: 3 — Deck: Slab or Crawl Space	
()			# of Bedrooms/Units:	
()	Manufactured Home Garage:	(Size: x Deck:) # of Bedrooms:	
()	Business Square Foo	tage Retail Space:	Type:	
()	Industry Square Foo	tage:	Type:	
()	Home Occupation	# of Rooms:	Use:	
()	Addition to Existing Buildi	ng Size:	Use:	
()	Other:			
Sewag There revoca provid	is a \$250.00 charge for ration if the intended use	ik (Complete new tank ch new tanks, \$100 for e of the septic system	her necklist) (Existing Septic Tank () Sewer existing tanks. This approval is subject to a changes or if false information is certifies all information above is correct. Date: 9-15-11	+



CITY OF DUNN Zoning Compliance Form

NORTH CAROLINA • 28335 (910) 230-3505 Buikling Code Enforcement	POST OFFICE BOX 1065 • DUNN • NORTH C (910) 230-3503 Planning, Subdivision and Zoning (910) 230-3	
		Name of Business: # of Square Feet:
Wame of Business: # of Square Feet:	Name of Business: # of Square Feet:	# of Square Feet:
Other:	□ Office	☐ Office Name of Business:
a or odnato i eer		Warne of Business: # of Square Fcct:
Name of Business:	Ste bult	Commercial Commercial
- Commercial	Proposed Use of the Property	Current Use of the Property: Residential
Square Feet: Acreage: 4 154UL)	()	Property Owner Contact Telephone Number (
Dimensions of Property: Width: Depth:	planting agost	Property Owner Address: 15 Page (Piezze include City, State, and Zap Code) Dunny
COLF	M	vner Name:
- Or#	N C 40001	Subdivision Manual N C 2000
County PIN: 1515-99-094-000	re Load	Property Address: (Please include City, State, and Zip Code) (Please include City, State, and Zip Code)
		Applicant's Contact Telephone Number: (
		Applicant's Name: Jo & John SC
PERTY OWNER	TO BE COMPLETED BY THE PROPERTY OWNER	Property Identification Information.
uildings, the distance from each building to property lines, all driveway	Please attach a plot plan showing lot lines and dimensions, the location and size of all existing and proposed buildings, the distance entrances, parking and loading areas, all existing landscaping (generally).	Please attach a plot plan showing lot lines and dimensions, the location are entrances, parking and loading areas, all existing landscaping (generally).

(9)	Zoning Ad		Special Conditions:	Zoning Classification 1 30 2000 Required Lot Size Required Front Yard Set Back		Number spaces provided	Parking Spaces	Width: Depth:	;	Depth:	Building Two	Current Use:	Building One Width:	☐ Vacant Land	Existing Building(s):	
POST OFFICE BOX 1065 • DUNN • NORT (910) 230-3503 Planning, Subdivision and Zoning (910) 2	Date: 9-16-11 Amount	Reserve	Panel	Floedplain Determination: Property is not located in a floodplain Property is located in floodplain, but o	TO BE COMPLETED BY THE ZONING OFFICIAL	Property Owner Signature:	plot plan is correct and complete to the best of my knowledge. I understand that all decisions r according to this information. I understand that this permit, if granted, is issued on the basis of and that this permit may be revoked in the event of any breach of representation or conditions.	Owner Certification: I hereby certify that I am the owner of the above ide	Dimensions of new construction	☐ Additional Building	☐ Addition to Existing Structure	☐ Modification of Existing Structure	Use of Existing Structure	☐ New Construction	Proposed Project:	CITY OF DUNN Zoning Compliance Form
NORTH CAROLINA • 28335 (910) 230-3505 Building Code Enforcement	nt: Receipt Number:		Number Date of Panel	Determination: Parking Spaces: Property is not located in a floodplain Property is located in floodplain, but development is not. Provided	ZONING OFFICIAL		plot plan is correct and complete to the best of my knowledge. I understand that all decisions rendered will be based on and enforced according to this information. I understand that this permit, if granted, is issued on the basis of the information supplied by the owner and that this permit may be revoked in the event of any breach of representation or conditions.	Owner Certification: Thereby certify that I am the owner of the above identified property, that the information shows and shows on the attached	Square feet of new construction	☐ Natural Gas	Storm Water System	☐ Public Sewer ☐ Private Septic System	☐ Public Water ☐ Private Well	☐ Electricity	Connection to Utilities:	orm

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