APP# 6496

Harnett County Central Permitting PO Box 65 Lillington, NC 27546

Telephone Number 910-893-4759 US -5 - 649

Application for Environmental Health Improvement Permit in Areas Zoned by Municipalities

	Name: Koger H. Dupre	Applicant Information: Name: Same
	Address: 1307 Pearidge Rd	Address:
	Phone: 919-427-2749	Phone:
	Property Location: E911 Address: Lipscomb Road	
	E911 Address: Lipscom b Road  PIN or Parcel #: 0684-69-0346.000	3 04 0684 0011
	State Road #: Lot/Tract Size:	
	Subdivision:	Lot #:
	Give Specific directions to the property from Lillington: Hetton Lipscomb F	ed approx 2/10 mile
Nodular	Proposed Use: Single Family Dwelling (Size 36 X 57) Basement Basement w/plumbing	# of Bedrooms 3
	() Multi-Family Dwelling - # of Units	# of Bedrooms/Units
	() Manufactured Home (SizeX)  Deck	# of Bedrooms Garage
	() Number of Persons per Household	
	() Business – Square Footage Retail Space	Туре
	() Industry – Square Ft Type	
	() Home Occupation - # of Rooms/Size	Use
	() Addition to Existing Building – Size	
	() Other	
	Water Supply: ()County ()Well ()Other	
	Sewer: () New Septic Tank () Existing Septic	Tank () Revision () Sewer
	Sewer: (New Septic Tank () Existing Septic Tank Applicant's Signature () Existing Septic Tank	m

## LAND E AND PROPERTY DISCRIPTI TOWN OF ANGIER, N. C.

APPLICATION FOR :				
( ) Improvement permit	( ) Zoning of Property			
( ) Mobile Home lot	( ) Subdivision Approval			
( ) Conditional Use	( ) Mobile Home Park			
( ) Parking permit	( ) Grading permit			
( ) Satellite Dish Antenna	( ) Temporary permit			
( ) Signs	( ) Special Use			
( ) Fences	other Mopular Home			
	(1) Other 110 bylar 140mce			
APPLICANT:	OWNER:			
Name Roser Dupree	Name			
Address 1307 Peavidge Rd.	Address			
Phone Awgier, NC.				
	Phone			
PRESENT USE OF PROPERTY				
LOCATION OF PROPERTY Lips comb roap				
PROPOSED USE OF PROPERTY				
( ) Single Family Dwelling : # Rooms # Bedrooms Square feet				
( ) Multi Family Dwelling: # of units#Bedrooms (per unit)				
square feet (per unit)				
( ) Mobile Home (single lot): single wi	dedouble wide			
( ) Mobile Home Park: Section 16, Zoning Ordinance must apply				
Type of business				
(Y Others (specify) Modular	Home			
	teAddition			
attach site plan showing property lines including driveways, ratios, decks, etc.	, location of proposed structures c.) and any existing structure.			
MATER & SEWER SUPPLY: WATER	SEWER			
Private Public				
Proposed				
Existing				
PPLICANT: I certify that all of the st	ratements made in this serlingtion			

APPLICANT: I certify that all of the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application.

Authorized Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

DATE 2-14-03

## ZONING ADMINISTRATOR USE ONLY

Family DeNELLING be used as Single	
NOTES:	
PERMIT # 03-014	
zoning administrator Ke Slattom	
DATE 2-14-03	