

Initial Application Date: 4-1-04
~~3-12-04~~

Application # C 50009137

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

LANDOWNER: DAVEY Rinaldi McLEAN Mailing Address: 74 Precious Ln.
City: Lillington State: N.C. Zip: 27546 Phone #: (910) 893-3905

APPLICANT: Same as above Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: _____ SR Name: _____
Parcel: 10-0559-0118 PIN: 0559-34-1338

Zoning: _____ Subdivision: _____ Lot #: _____ Lot Size: 1.74
Flood Plain: X Panel: COBE Watershed: LV Deed Book/Page: 1080-716 Plat Book/Page: 2003-047

If located with a Watershed indicate the % of Imperious Surface: _____
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE HWY 210 South, TAKE first left off 210, ONTO Precious Ln. STREET. 2nd DRIVEWAY, TAKE Roadway AT 2nd House. [80yds] back IS Land Location

medular

PROPOSED USE:

- Sg. Family Dwelling (Size 76' x 276') # of Bedrooms 3 # Baths 3 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 1
- 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 _____

** See Lillington Zoning*

Water Supply: County Well (No. dwellings _____) Other will have well put in.

Sewage Supply: New Septic Tank Existing Septic Tank County Sewer Other _____

Erosion & Sedimentation Control Plan Required? YES NO

Structures on this tract of land: Single family dwellings 1 Manufactured homes _____ 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>25'</u> | _____ |
| Side | <u>10'</u> | _____ | _____ | _____ |
| Nearest Building | <u>10'</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.

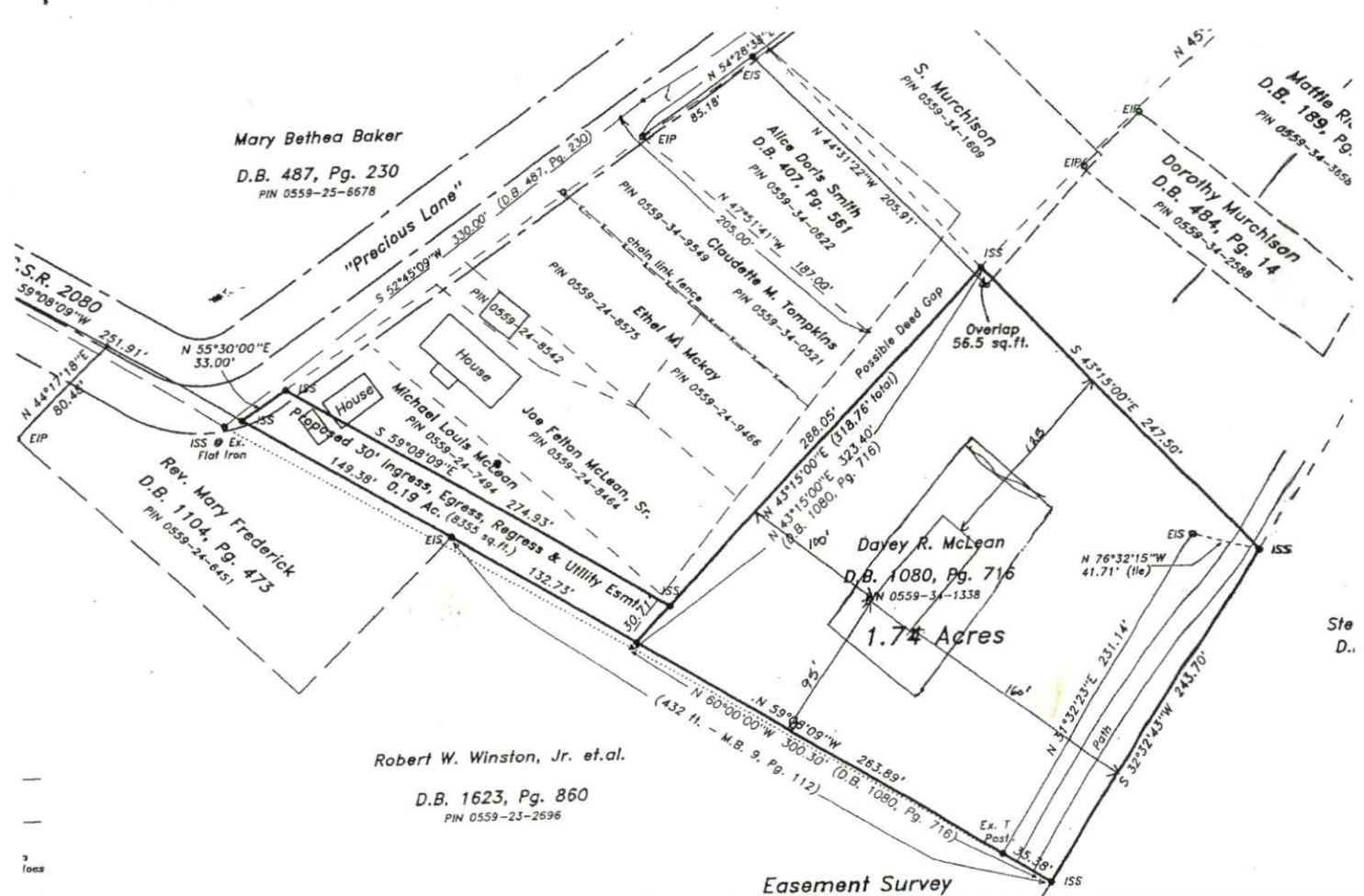
Davey F. McLean
Signature of Owner or Owner's Agent

March 12, 2004
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 PERMIT

902 4/2 S



Mary Bethea Baker
D.B. 487, Pg. 230
PIN 0559-25-6678

"Precious Lane"
S 52°45'09"W 330.00'
PIN 0559-24-8542

Alice Doris Smith
D.B. 407, Pg. 561
PIN 0559-34-0622

S. Murchison
PIN 0559-34-1009

Dorothy Murchison
D.B. 484, Pg. 14
PIN 0559-34-2588

Mattie R.
D.B. 189, Pg.
PIN 0559-34-3858

S.R. 2080
59°08'09"W

Rev. Mary Frederick
D.B. 1104, Pg. 473
PIN 0559-24-8451

Robert W. Winston, Jr. et al.
D.B. 1623, Pg. 860
PIN 0559-23-2696

Daye R. McLean
D.B. 1080, Pg. 716
PIN 0559-34-1338

Easement Survey

HARNETT COUNTY, N.C.
FILED DATE _____ TIME _____
MAP NUMBER _____
REGISTER OF DEEDS
KIMBERLY S. HARGROVE
By _____
(Deputy) Register Of Deeds

| |
|------------|
| Revisions: |
| |
| |
| |
| |

Map For: **Michael Louis & Karen D. McLean**
74 Precious Lane
Lillington, NC 27546

TOWNSHIP: Lillington
STATE: NORTH CAROLINA
ZONE:

and
1007 Pine Acres Ct.
Knightdale, NC 27545

COUNTY: Harnett
Parcel Number: SEE MAP

STREAMLINE L
870 N.C. Hwy.
Phone: 910-899-
DATE: 6-26-2003
SCALE: 1" = 60'
CHECKED & CLOSURE B





TOWN OF LILLINGTON ZONING PERMIT

Town of Lillington
Bob Greback, Zoning Administrator
P.O. Box 296
Lillington, North Carolina 27546
Tel: 910-893-2654 Fax: 910-893-3693

THIS PERMIT WILL NOT BE PROCESSED WITHOUT THE FOLLOWING REQUIREMENTS:

- 1) A site plan in duplicate showing the shape, location, and dimensions in feet of the lot drawn to scale showing distances from all property lines to all proposed and existing buildings, structures, and signs on the property.
- 2) Square footage of all new buildings and structures.
- 3) If you are disturbing more than one (1) acre of land, you must include in the site plan the total number of acres of the lot and the total number of acres that is currently and/or will be built-upon.
- 4) The permit must be **completely** filled out.
- 5) A \$35.00 fee when approved.

ATTENTION:

- A. See the reverse side for a guide to lot size, lot width, and setback requirements for each Zoning District.
- B. If one (1) acre or more of land will be disturbed, adherence to the Watershed Protection Ordinance and a Watershed Protection Permit will be required.
- C. If you are building within a floodplain, adherence to the Floodplain Protection Ordinance and a Floodplain Development Permit will be required.
- D. For commercial, multifamily, or industrial development or development in a floodplain or construction disturbing more than one (1) acre you must schedule an appointment with the Zoning Administrator.

Street Address/Location of Property: 74 PRECIOUS LANE, Lillington, South 210 Hwy
 Zoning District: R RA-A C-1 C-2 C-3 I OS
 Property Identification Number (PIN): 0 5 5 9 - 3 4 - 1 3 3 8
 Proposed Use of Property, Building or Structure: Family Dwellings modular Home 76x27
 Nature of Project (Check all that apply): Disturbing one acre or more? Yes No
 Residential Non-Residential New Addition /Alteration Demolition New Business
 Water System: Public Private Property Located Within Town Limits? Yes No
 Sewer System: Public Private Property Located Within a Floodplain? Yes No
 Setback Distances in Feet from Property Lines to Main Building or Structure:
 From Front Property Line: 30 ft. From Right Side Property line: 20/50 ft. From Corner: 35 ft.
 From Rear Property Line: 20/50 ft. From Left Side Property Line: 20/50 ft.

1. APPLICANT (Property Owner, Property Owner's Representative, Architect or Engineer):
 Name: DAVEY RINALDI McLEAN Phone: (910) 893-3905
 Address: 74 PRECIOUS LANE
 2. OWNER OF PROPERTY (If Different from Applicant):
 Name: _____ Phone: _____
 Address: _____
 3. PROJECT DEVELOPER (If Different from Owner):
 Name: _____ Phone: _____
 Address: _____

I, We hereby certify that all of the information furnished in this application, and all included materials, are true to the best of my/our knowledge.

Owner/Agent Signature: Davey R. McLean Date: March 12, 2004

APPROVED Comments _____
 DENIED Comments _____

Zoning Administrator T. Tamm Date 1 Apr 04

SCANNED
4/17/09
DATE

OT/Brm
HAS Well Const. Permit

Application # 09 500 21925
Harnett County Central Permitting REF 04 50009137
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-7525 Fax 910-893-2793

604#
099198

Application for Environmental Health Improvement Permit in Areas Zoned by Municipalities

Land Owner Information:

Name: DAVEY RINALDI M'LEAN
Address: 56 Precious Ln.
Lillington, N.C. 27546
Phone: (910) 893-3905

Applicant Information:

Name: DAVEY RINALDI M'LEAN
Address: 56 Precious Ln.
Lillington, N.C. 27546
Phone: (910) 893-3905

Property Location:

E911 Address: 56 Precious Ln. Lillington, N.C. 27546
PIN or Parcel Number: 0559-34-1338
Subdivision: _____ Lot Number: N/A
Lot Size: 1.74A. Zoning: R-20

Specific Directions to Job from Lillington: TAKE Hwy 210 south of Lillington about a quarter of a mile. Take 1st left off 210 Hwy onto Precious Ln. and 1st dirt drive on right. 80yds back.

Proposed Use:

- () Single Family Dwelling (Size: _____ x _____) # of Bedrooms: _____
Basement: _____ Basement w/ Plumbing: _____ Deck: _____ Slab or Crawl Space
- () Multi Family Dwelling # of Units: _____ # of Bedrooms/Units: _____
- (x) Manufactured Home (Size: 32' x 80') # of Bedrooms: 3
Garage: _____ Deck: 8x14
Back
- () Business Square Footage Retail Space: _____ Type: _____
- () Industry Square Footage: _____ Type: _____
- () Home Occupation # of Rooms: _____ Use: _____
- () Addition to Existing Building Size: _____ Use: _____
- () Other: _____

Water Supply: (x) County () Well () Other
Sewage: (x) New Septic Tank (Complete new tank checklist) () Existing Septic Tank () Sewer
There is a \$250.00 charge for new tanks, \$100 for existing tanks. This approval is subject to revocation if the intended use of the septic system changes or if false information is provided on this application. Your signature below certifies all information above is correct.

Applicant Signature: Davey Rinaldi M'Lean Date: April 16, 2009
4/17/09 S

(FEE TO APP #)
0450009137

Mottle Rk
D.B. 189, Pg.

SITE PLAN APPROVAL

DISTRICT LIVINGSTON USE DwM1H

PIN 0559-34-3656

#BEDROOMS 3

4/16/09 
ZONING ADMINISTRATOR

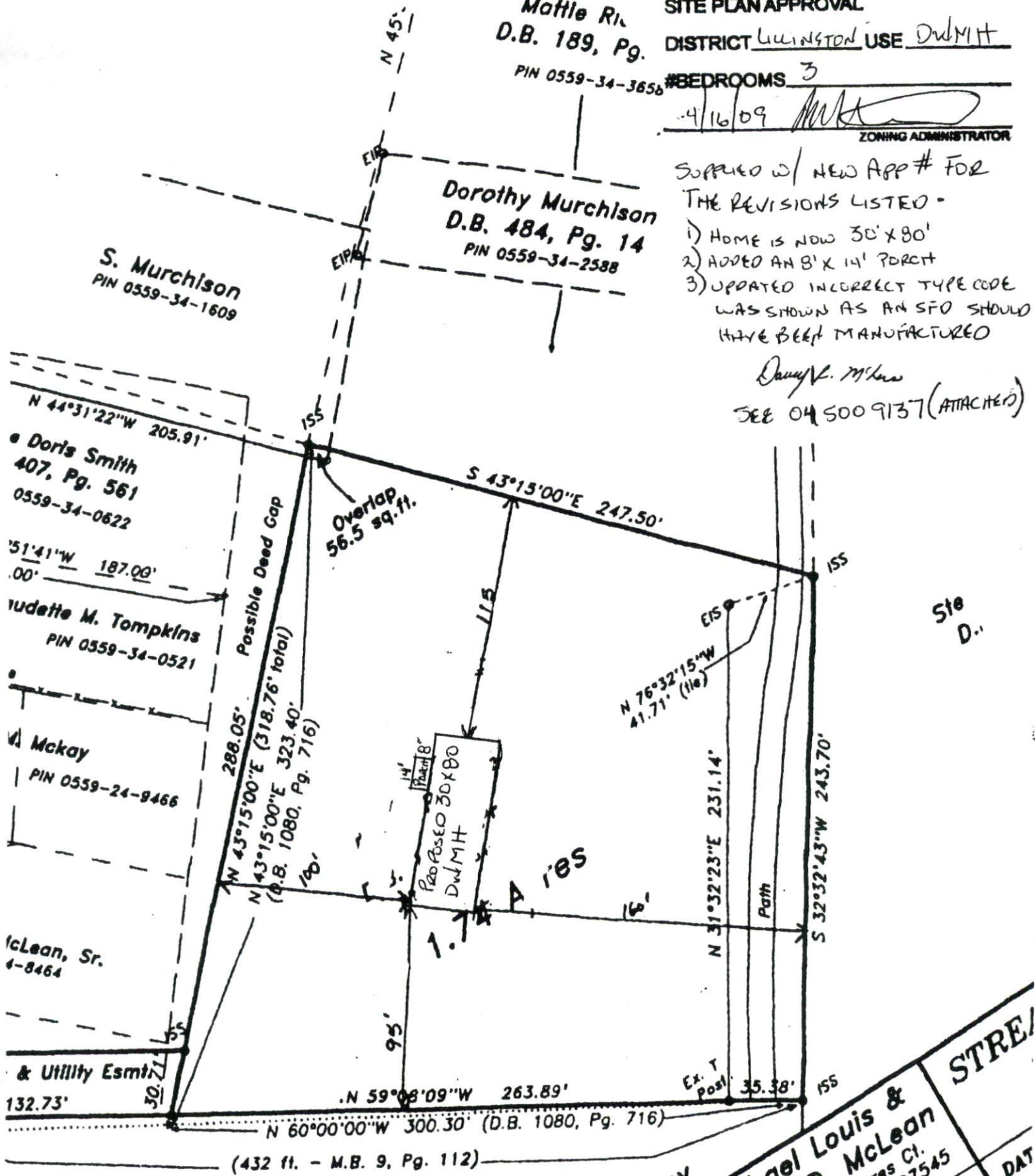
SUPPDED W/ NEW APP # FOR

THE REVISIONS LISTED -

- 1) HOME IS NOW 30' X 80'
- 2) ADDED AN 8' X 14' PORCH
- 3) UPDATED INCORRECT TYPE CODE WAS SHOWN AS AN SFD SHOULD HAVE BEEN MANUFACTURED

Danny V. McLean

SEE 045009137 (ATTACHED)



Ste D..

ement Survey

For: Michael Louis & Karen D. McLean
1007 Pine Acres Ct.
Knightdale, NC 27545

STRE

DAT

Initial Application Date: 4-1-04
~~3-12-04~~

Application # 04-50009137

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If located with a Watershed indicate the % of Imperious Surface: _____
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE HWY 210 South, TAKE FIRST
Left off 210, ONTO PRECIOUS LN. STREET. 2ND DRIVEWAY, TAKE
ROADWAY AT 2ND HOUSE. [Boyd's] BACK IS LAND LOCATION

medular

PROPOSED USE:
 Sg. Family Dwelling (Size 76' x 27 1/2') # of Bedrooms 3 # Baths 3 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 1

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 will have well

Sewage Supply: New Septic Tank Existing Septic Tank County Sewer Other put in.

Erosion & Sedimentation Control Plan Required? YES NO

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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 35' _____ Rear 25' _____

Side 10' _____ Corner _____

Nearest Building 10' _____

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.

Davey L. M'Lean
Signature of Owner or Owner's Agent

March 12, 2004
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 PERMIT

HARNETT COUNTY HEALTH DEPARTMENT

HTE 04-5-9137

IMPROVEMENT PERMIT

20748

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) DAVEY McLEAN New Installation Septic Tank
 Property Location: SR# NC210 (PRECIOUS LN) Repairs Nitrification Line

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 1.74

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 100 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 24 in.

French Drain Required: _____ Linear feet

Date: 4/20/04

Signed: [Signature] Environmental Health Specialist

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

- * MAINTAIN ALL SETBACKS
- * CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION

30' REAR EASEMENT

318' TOTAL

