

Revision note
 Initial Application Date: 7/2/07 ENV. Rec'd 7/3/07 Application # 0450010539A

COUNTY OF HARNETT LAND USE APPLICATION
 Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org

LANDOWNER: Eugene L. Wigley Mailing Address: PO Box 1823
 City: Angier State: NC Zip: 27501 Home #: _____ Contact #: _____

APPLICANT: CWW CONTRACTORS Mailing Address: 172 WINDMERE DR.
 City: Angier State: NC Zip: 27501 Home #: 919-639-0522 Contact #: 919-796-9286

*Please fill out applicant information if different than landowner
 PROPERTY LOCATION: Subdivision: PEAR MEADOW Lot #: 3 Lot Size: .347

Parcel: 040662 0015 06 PIN: 0662-13-2855.000

Zoning: RA-30 Flood Plain: X Panel: 0662 Watershed: IV Deed Book&Page: 0200/0915 Map Book&Page: 2001-1016

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 210 TOWARDS ANGIER, LEFT ON HARNETT CENTRAL Rd. / S/D IS 1/4 MILE ON RIGHT

PROPOSED USE:

- Circle: Crawl Space Slab
- SFD (Size 54 x 44) # Bedrooms 3 # Baths 2 Basement (w/w bath) N/A Garage YES Deck YES
 - Modular: ___ On frame ___ Off frame (Size ___ x ___) # Bedrooms ___ # Baths ___ Garage ___ (site built? ___) Deck ___ (site built? ___)
 - Multi-Family Dwelling No. Units ___ No. Bedrooms/Unit ___
 - Manufactured Home: ___ SW ___ DW ___ TW (Size ___ x ___) # Bedrooms ___ Garage ___ (site built? ___) Deck ___ (site built? ___)
 - Business Sq. Ft. Retail Space ___ Type ___ # Employees: ___ Hours of Operation: ___
 - Industry Sq. Ft. ___ Type ___ # Employees: ___ Hours of Operation: ___
 - Church Seating Capacity ___ # Bathrooms ___ Kitchen ___
 - Home Occupation (Size ___ x ___) # Rooms ___ Use ___ Hours of Operation: ___
 - Accessory/Other (Size ___ x ___) Use ___
 - Addition to Existing Building (Size ___ x ___) Use ___ Closets in addition (___)yes (___)no

Water Supply: County (___) Well (No. dwellings ___) MUST have operable water before final
 Sewage Supply: New Septic Tank (Must fill out New Tank Checklist) (___) Existing Septic Tank (___) County Sewer (___) Other
 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 1 proposed Manufactured Homes ___ Other (specify) ___

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35	37 ✓
Rear	25	54 ✓
Side	10	16.3 ✓
Sidestreet/corner lot	20	35.2 ✓
Nearest Building on same lot	6	

Comments: Whole new land use form

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 of plans submitted. I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. This permit is subject to revocation if false information is provided on this form.

Signature of Owner or Owner's Agent: Chita W. Wean Date: 7/2/07

This application expires 6 months from the initial date if no permits have been issued
 A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY

7/2 N

Plot Plan Only Not a Survey

NOTE:
A 10' x 70' Sight Triangle shall be placed at all street intersections as shown hereon.

L=39.27'
R=25.00'
(S 29°32'13"E)
35.36'

**Harnett County
Minimum Building
Setback Requirements
RA-20R, RA-20M, RA-30 & RA-40**

FRONT: 35' from R/W
REAR: 25'
SIDE: 10'
CORNER LOT SIDE: 20'

Revision
SITE PLAN APPROVAL
DISTRICT RA30 USE SFD
#BEDROOMS 3
Date 12/10/07
Zoning Administrator [Signature]

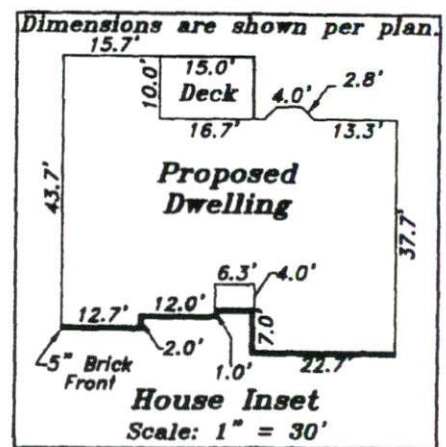
Barlane Dev., LLC
D.B. 1509, Pg. 208

**Christopher Weaver
and CWW Contractors**
D.B. 2248, Pg. 676
M.N. 2001-1016

ZIRTD 24"

1.57%
0-10 SL
10-43 JCL

Note:
Front Setback Dimension is to 8" block wall not to brick wall.



Map Number 2001-1016

Lot 3 -
D.B. 2000
PH

CWW

Black River
Scale: 1" =

Survey
STANCIA
Profession
P.O.Box 7
919-639-21

NOT F

OWNER NAME: CWW CONTRACTORS / CHRISTOPHER W. WENSER APPLICATION #: 0450010539

This application to be filled out only when applying for a new septic system.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

DEVELOPMENT INFORMATION

- New single family residence
- Expansion of existing system
- Repair to malfunctioning sewage disposal system
- Non-residential type of structure

WATER SUPPLY

- New well
- Existing well
- Community well
- Public water
- Spring

Are there any existing wells, springs, or existing waterlines on this property?

yes no unknown

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative
- Alternative Other _____
- Conventional Any

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant must attach supporting documentation.

- YES NO Does the site contain any Jurisdictional Wetlands?
- YES NO Does the site contain any existing Wastewater Systems?
- YES NO Is any wastewater going to be generated on the site other than domestic sewage?
- YES NO Is the site subject to approval by any other Public Agency?
- YES NO Are there any easements or Right of Ways on this property?
- YES NO Does the site contain any existing water, cable, phone or underground electric lines?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Christopher W. Wensler
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7/2/07
DATE