nitial Application Date: 1-17-2005	Application # 055001167
COUNTY OF HA Central Permitting 102 E. Front Street, Lillington, N	RNETT LAND USE APPLICATION HOUSE 111667
ANDOWNER: Jody L. Milliron	Mailing Address: 109 11 10 (100. The
ity: ANGIER, NC State:	50' 7in: 27501 Phone # 919 1230 (130)
	Mailing Address: P. O. Box 969
ity: ANGIEL State: N	C zip: 27501 Phone #: 919 - 639 - 6100
11y	T .
ROPERTY LOCATION: SR #: 1440 SR Name:	James Novnis Rd.
arcel: 04 0072 0095 35	m. Nob3-76-728-7 000
arcel: U DU TE COMO SO	PIN: 0003-15-2387.000
oning: RAYO Subdivision: JUNNIS (VILK	Lot #: 55 Lot Size:
ood Plain: X Panel: 50 Watershed: 1	Deed Book/Page: OTP Plat Book/Page: P(#+)793-D
RECTIONS TO THE PROPERTY FROM LILLINGTON: HUY	210 (Toward ANGIER) LEFT ONTO James
Norris Road, ABout mile - turi	
GARY DR. LOT IS ON LEFT - LO	7 35
2000000 1000	
ROPOSED USE:	ha Bassanir i i i i i
Sg. Family Dwelling (Sizex)# of Bedrooms# Bat Multi-Family Dwelling No. UnitsNo. Bedrooms	Basement (w/wo bath) Garage Deck
Manufactured Home (Sizex) # of Bedrooms	
	Garage Deck
Number of persons per household	Type NO ENCACHCILL.
Industry Sq. Ft	Type Frically dill' divididi
Church Seating Capacity Kitchen	
Home Occupation (Sizex) # Rooms	
Additional Information:	
VAccessory Building (Size 20 x 24) Use STOVOGE	bldings
Addition to Existing Building (Sizex) Use	
Other	
ditional Information:	
ater Supply: ( County ( ) Well (No. dwellings)	(_) Other
wage Supply: ( New Septic Tank ( ) Existing Septic Tank	() County \$ewer () Other
osion & Sedimentation Control Plan Required? YES NO	
operty 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;
uctures on this tract of land: Single family dwellings Manufactures	tured homes Other (specify) IDYOD STOVAGE DIQUIT
quired Residential Property Line Setbacks:	nimum Actual
Front	35 726'
Rear	25 25'
Side	10 10'
Corner	20
Nearest Building	10 40'
permits are granted lagree to conform to all ord rances and the laws	of the State of North Carolina regulating such work and the specifications or
ns submitted. I hereby swear that the foregoing statements are accurate	
Uhada O Vilson	1/17/05
inature of Owner or Owner's Agent	Date

\*\*This application expires 6 months from the initial date If no permits have been issued\*\*

05500111/27

nitial Application Date: 1-17-2005

mature of Owner or Owner's Agent

Br

Application # 0550011166 - Home

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

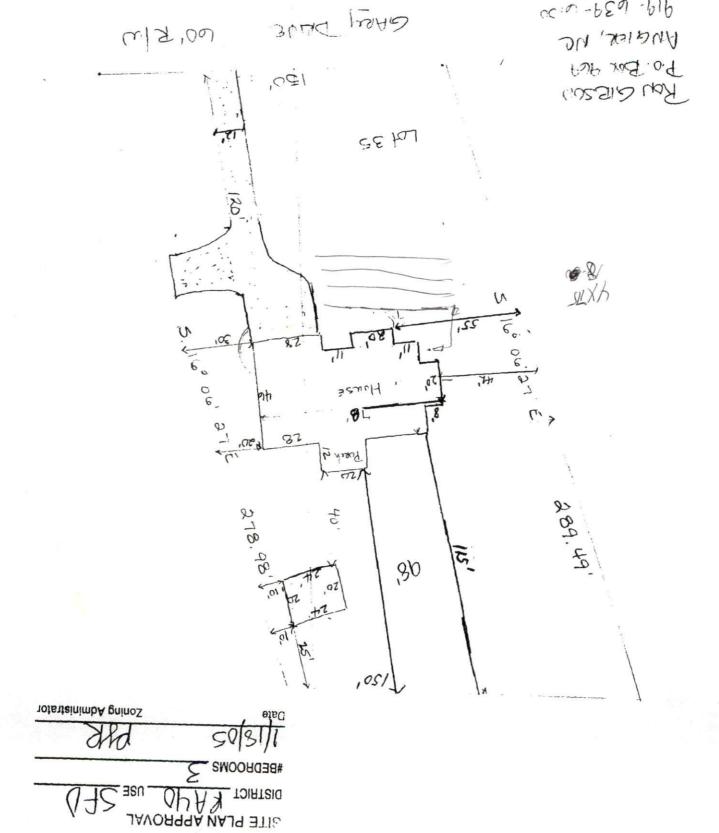
Fax: (910) 893-2793

					<i>G</i> 1 = 1
ANDOWNER: Jody L. Milli	RON	Mailing Ad	dress: 19 Wa	lace De.	82621
ity: ANGIER, NC					
PPLICANT: RON GIBSON		Mailing Add	dress: <u>P.O.7</u>	30x 969	
ity: ANGIER	State:	NC Zip:	2750/ Phone #:	919-639-	6100
		Tam	05 N N 20	01	
ROPERTY LOCATION: SR #: 144	SR Name:	SWY	es Novvis	> KOI.	
idress: OL		7.7	12 22 030		
arcel: 04 0672 0095 35	15 (1) 00 1	PIN: <u>()(0)</u>	63-75-238		
oning: RACO Subdivision: LLC	inp chille		\Lot #:		Size: 98
ood Plain: X Panel: 50	'Natershed:	Deed Bo	ook/Page: OTP	Plat Book/P	Page: PC#F/793-L
RECTIONS TO THE PROPERTY FROM LI	LLINGTON: H	Wy 210 G	JUARD ANGI	LEFT O	
Noepis Road, ABOXT				s CREEK.	1st LEFT
GARY De. Lot is	in ceri-	COT 35			7 101
ROPOSED USE: 60 80			······································	2//	1424
Sg. Family Dwelling (Size 40 x 50)	of Bedrooms 3	#Baths 2 Bas	sement (wwo hath)	Garage 4/a X	120 L
Multi-Family Dwelling No. Units				Garage 1 G	Deck
Manufactured Home (Sizex)		The state of the s		Tu	
Number of persons per household					ollida
Business Sq. Ft. Retail Space		Туре			
Industry Sq. Ft	4)	Туре			
Church Seating Capacity					
Home Occupation (Sizex	# Rooms	Use			
Additional Information:				1015	
Accessory Building (Size x				TX -	
Addition to Existing Building (Size					
Other		* * NA * O			
ter Supply: ( County ( ) Well (	No dwellings	) ( ) Other			
wage Supply: ( New Septic Tank (	10/504 340. 140-1000-1000-1000		unty Sewer (	) Other	1 (4)
sion & Sedimentation Control Plan Required			unty dewel	) Other	
perty owner of this tract of land own land that		ctured home w/in fir	ve hundred feet (500')	of tract listed above?	YES NO
uctures on this tract of land: Single family dv					
quired Residential Property Line Setbacks	1 1	Minimum	Actual		
	Front	35	120'		
			98'		
	Rear	25			
	Side	10	20'		
	Corner	20			
	Nearest Building	10	40		
	, rearest building				
ermits are granted I agree to conform to all	ord nances and the	laws of the State	of North Carolina regu	lating such work and t	he specifications or
is submitted. I hereby swear that the forego					
				100 11 00 10 10 10 10 10 10 10 10 10 10	

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

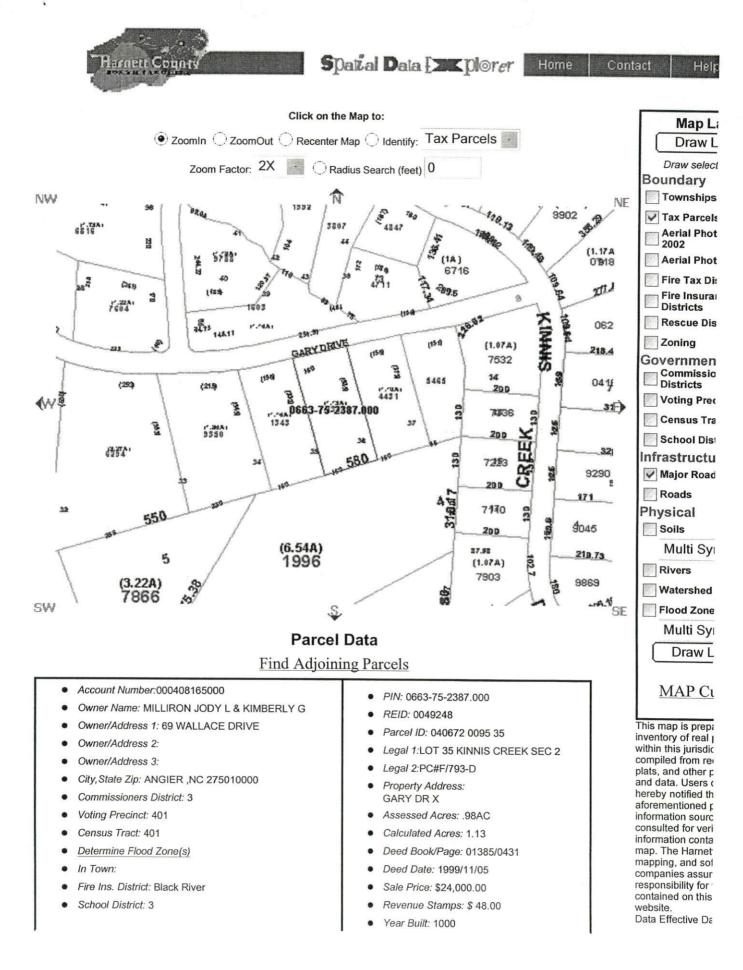
A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE APPLICATION

06/04



419-639-PIP

7=1



## HARNETT COUNTY HEALTH DEPARTMENT

IMPR /EMENT PERM

Nº 13623

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) New Installation Septic Tank Property Location: ☐ Repairs Nitrification Line Subdivision Lot # Tax ID #. Quadrant # Number of Bedrooms Proposed: Lot Size: Basement with Plumbing: Garage: Water Supply: Public ☐ Community 50 min Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other Jump Size of tank: Septic Tank: 1000 gallons Pump Tank: 1006 gallons Subsurface exact length width of depth of of each ditch \_\_/00 ft. ditches\_ Drainage Field ditches ft. ditches 18.24 in. French Drain Required: \_ \_\_\_\_\_ Linear feet Date: This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist #Maintain Setbook 289 xxi Hard markers required \* Rualines on \* Contrac 150 Meet Onsite prior to installing 2781

## AUT DRIZATION TO CON RUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 13 22 . 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.

Owner or Authorized Agent				
Name: Jody Lee Millimon Telephone # 639-4362				
Address: 69 Wall ace Dr. Angile N.C. 27501				
Property Location: SR # 1440 Road Name Demos Paris				
New Installation Repair Septic Tank Nitrification Lines				
Subdivision _ Kinnis Creek Sec 2 Lot# 35				
Number of Bedrooms Proposed: Lot size: 98 Ac				
Basement With Plumbing Without Plumbing				
Water Supply: Well Public Minimum Well Setback: _50 ft.				
Type of System: Conventional Other Pomp to Convertional				
Tank Volume: Septic Tank / SOO gallons Pump Chamber / SOO gallons				
Nitrification Field Specifications				
Number of fields/ Number of Lines per Field Length of lines/coft_				
Width of ditches ft. Depth of ditches 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.				
Authorized Agent for Harnett County Health Department  Name: Date: ///95  (Revised 2/96)cnstrct.wpd				