

Initial Application Date: 3/30/05 Application # 0550011764
251 Mamie Ferguson
 COUNTY OF HARNETT LAND USE APPLICATION 887730

Central Permitting 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793

LANDOWNER: Mike Ray Mailing Address: 3417 Spring Hill Ch Rd
 City: Lillington State: NC Zip: 27546 Phone #: 499 8382

APPLICANT: Mike Ray Mailing Address: 3417 Spring Hill Ch Rd
 City: Lillington State: NC Zip: 27546 Phone #: 499 8382

PROPERTY LOCATION: SR #: 1291 SR Name: Old US 421
 Parcel: 130630 0029 20 PIN: 0630-64-0377
 Zoning: BA30 Subdivision: MAMIE Bell Ridge Lot #: 19 Lot Size: .64
 Flood Plain: X Panel: 80 Watershed: n/a Deed Book/Page: 1513/921 Plat Book/Page: 2003/1139

If located with a Watershed indicate the % of Imperious Surface: _____
 SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
From Lillington take old 421 North subdivision is 2 1/2 mile on Right

PROPOSED USE:
 Sg. Family Dwelling (Size 50 x 70) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) _____ Garage Deck
 Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
 Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____ Included

Comments: _____
 Number of persons per household Spec
 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 _____
 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 Proposed Manufactured homes _____ Other (specify) _____

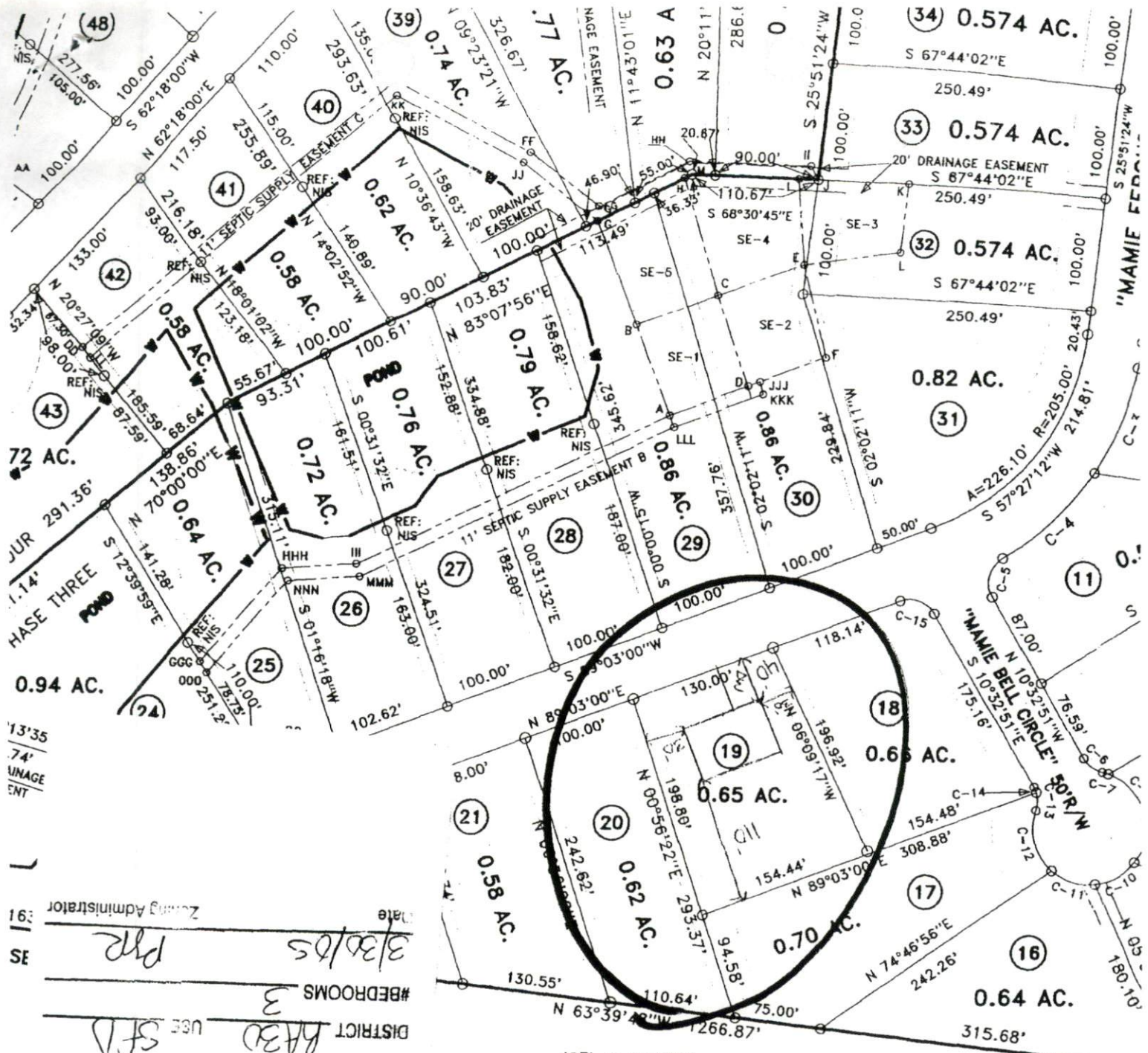
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? YES NO

Required Property Line Setbacks:	Minimum	Actual	Minimum	Actual
Front	<u>35</u>	<u>40</u>	Rear	<u>25</u> / <u>110'</u>
Side	<u>10</u>	<u>30</u>	Corner	<u>—</u> / <u>—</u>
Nearest Building	<u>10</u>	<u>—</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.

Signature of Owner or Owner's Agent _____ Date 3/29/05

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



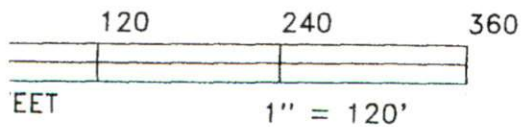
13'35
74'
UNAGE
ENT

SITE PLAN APPROV. _____
 DISTRICT R430 USE SFD
 #BEDROOMS 3
 PRR
 3/30/05
 Zoning Administrator _____
 Date _____

JOEL G. LAYTON
 WILL BK.7, PG 461

11' SEPTIC SUPPLY EASEMENT C

- LINE DD - EE = N 68°36'18"E 355.84'
- LINE EE - FF = S 42°52'19"E 135.19'
- LINE FF - GG = S 33°28'27"E 76.36'
- LINE GG - HH = N 83°07'56"E 86.88'
- LINE HH - II = S 68°30'18"E 106.71'
- LINE II - J = S 10°57'33"E 12.41'
- LINE J - M = N 68°30'45"W 110.67'
- LINE M - G = S 83°07'56"W 90.86'
- LINE G - JJ = N 33°28'27"W 82.25'
- LINE JJ - KK = N 42°52'19"W 127.40'
- LINE KK - LL = S 68°36'18"W 348.52'
- LINE LL - DD = N 20°27'09"W 11.00'



QA=1

#11