	NV Rec	'd 12/15/	05	
Initial Application Date: 10/2	elas ils	, ,	Application #	5500133334K
minual Application Date.	12/14/05		116	19384
Central Permitting	102 E. Front Street, Lillington,	ARNETT LAND USE A	PPLICATION Phone: (910) 893-47	59 Fax: (910) 893-2793
			30 (100000000000000000000000000000000000	3 1000 00100 00 <b>3</b> 000 1000 000 000 000 000 000 000 000 0
LANDOWNER: Lam Land				
City: FRUE THE	State: 1			
	State:			
				,
PROPERTY LOCATION: SR #:	/// SR Name:	Butto 10	LAto Rd	
Address: 564 Cayst	5 speings	Rel		
Parcel: 079595/2				
Zoning: PA 2010 Subdivision:				
Flood Plain: Panel: OU  DIRECTIONS TO THE PROPERTY F	ROM LILLINGTON:	2 Ktolo	Late El Syl	BITT INTO
Crosting -1				
Caystal Spein			, ,,	
	/			
PROPOSED USE:		- V	1	not includ
	(59) # of Bedrooms 3 # E		1 : -	ge <u>24476</u> Deck <u>20X</u> /0
D 100 100 100 100 100 100 100 100 100 10	X) # of Bedrooms		-	
Number of persons per househo		Garage	Deck	
	ace	Type	× "	
		Type		
	Kitchen			
	_x) #Rooms			i e
Additional Information:				
☐ Accessory Building (Size	_x) Use			
<ul> <li>Addition to Existing Building (S</li> </ul>	sizex) Use			
Other			ii)	
Additional Information:				
Water Supply: County				Other
Sewage Supply:   New Septic Ta  Erosión & Sedimentation Control Plar		County S	ewer	Other
		ged home w/in five hur	dred feet (500') of tract listed	above? YES NO
Property owner of this tract of land ow Structures on this tract of land: Single	e family dwellings Manu	ifactured homes	Other (specify)	
Required Residential Property Line		Minimum	Actual ,	
W/ uctoba auc mora	ront Front	35	4060'	
rusiune awig	AAA Rear	25	9751	
*Customer change 10 cation of hom	g Coo Tida	40	20121	
nex F Health ho				
Al a comment	Corner		a/s	
(norge pm)	Nearest Building	10	4/2	
If permits are granted I agree to con-	form to all ordinances and the la	ws of the State of No	rth Carolina regulating such	work and the specifications or
plans submitted. I hereby swear that				The same approximation of
/ 2/1/				
May His V.		_	10/25/	15

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

Signature of Owner or Owner's Agent

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

Date

14 5

privous BEDROOMS 3 ΌV 151.05 97 ,01 19

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