

25-B
"Lakeland w/SP"

Initial Application Date: 09/01/2006

Application # 00-50015675
1270056

COUNTY OF HARNETT LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793 www.harnett.org

LANDOWNER: Mary Mack Development, LLC Mailing Address: 121 Green Forest Circle

City: Dunn State: NC Zip: 28334 Phone #: (910) 897-0811

APPLICANT: (same as above) Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: 1201 SR Name: Donderosa Rd

Parcel: 094567 0006 63 PIN: 9556-89-6524.000

Zoning: RA-20R Subdivision: Carolina Seasons Lot #: 25-B Lot Size: .70

Flood Plain: X Panel: 007B Watershed: N/A Deed Book/Page: 2853/390 Plat Book/Page: Sheet PG#E/98C

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Carolina Seasons -> Straight in

toward back -> lot on left
24 to 87 N abt 1/2 mile to first rd on left Hilton to end sub across street

PROPOSED USE:

SFD (Size 48 x 48) # Bedrooms 3 # Baths 2.5 Basement (w/wo bath) N/A Garage incl Deck incl Crawl Space / Slab

Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____

Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____

Number of persons per household SPC

Business Sq. Ft. Retail Space _____ Type _____

Industry Sq. Ft. _____ Type _____

Church Seating Capacity _____ Kitchen _____

Home Occupation (Size _____ x _____) # Rooms _____ Use _____

Additional Information: _____

Accessory Building (Size _____ x _____) Use _____

Addition to Existing Building (Size _____ x _____) Use _____

Other _____

Additional Information: _____

Water Supply: County Well (No. dwellings _____) Other Environmental Health Site Visit Date: _____

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

Erosion & Sedimentation Control Plan Required? YES NO

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 Manufactured homes _____ Other (specify) _____

Required Residential Property Line Setbacks:	Minimum	Actual
Front	<u>35</u>	<u>40</u>
Rear	<u>25</u>	<u>77</u>
Side	<u>10</u>	<u>56</u>
Corner	<u>20</u>	<u>N/A</u>
Nearest Building	<u>10</u>	<u>N/A</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.

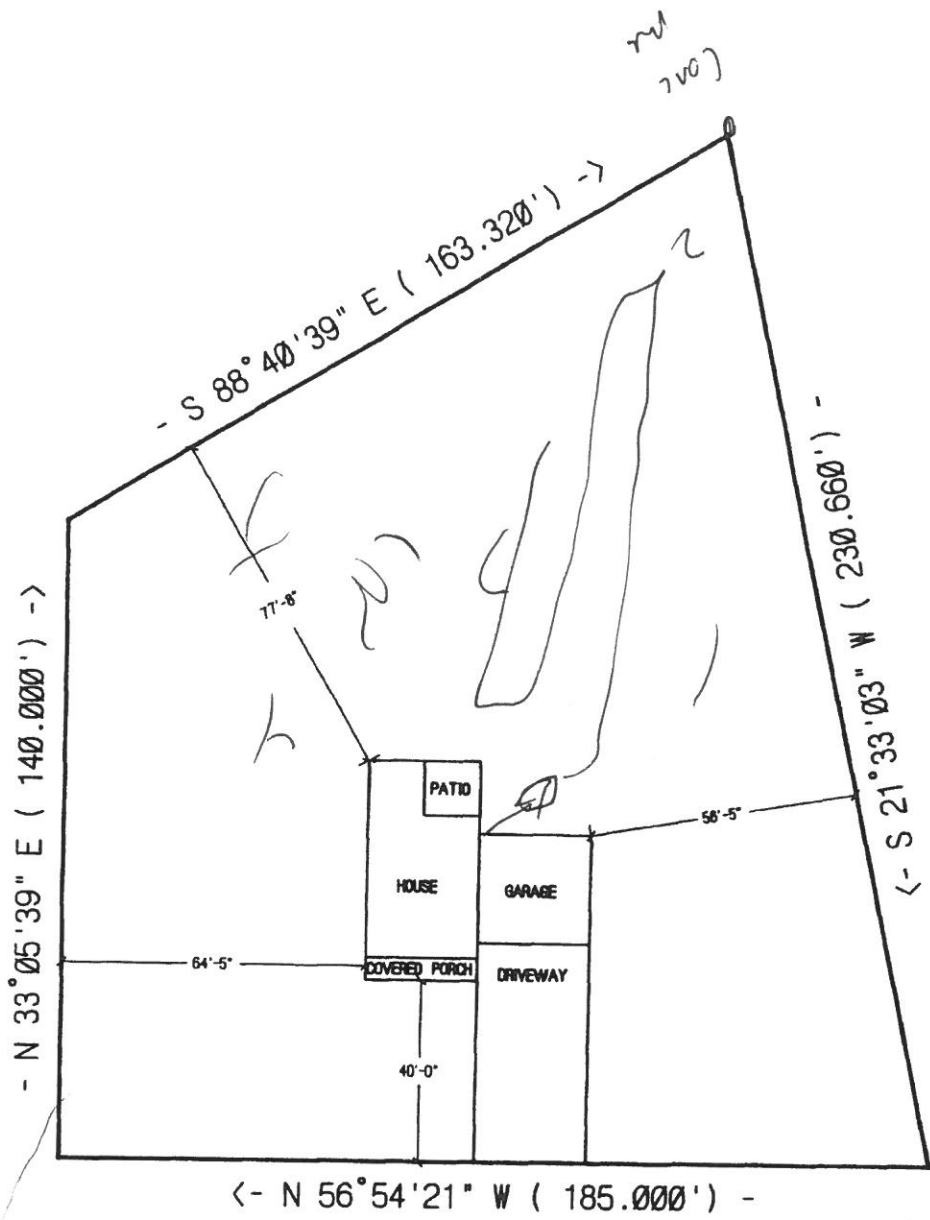
Natalie Pucci
Signature of Owner or Owner's Agent

8/30/06
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 APPLICATION

9/8 S



Handwritten notes:
 13/12/24
 C-11
 [Signature]

PONDEROSA TRAIL

SITE PLAN APPROVAL

DISTRICT RFAOR USE SFD

#BEDROOMS 3

Calabrese A. Pugliese
 Zoning Administrator

**MARY MACK DEVELOPMENT LLC.
 THE LAKELAND W/SUNROOM
 LOT #25 CAROLINA SEASONS
 SCALE: 1"=40'**

OWNER NAME: Mary Mack Development, LLC

APPLICATION #: DC50015LCT5

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?

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.

Natalie Price
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

9/1/06
DATE