

10.25.06

Initial Application Date: ~~10/13/06~~

Application # 0650015751 R
changed applicant name

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: Larry & Brenda Turlington Mailing Address: 3030 Old Stage Rd
City: Erwin State: NC Zip: 28339 Phone #: 910-897-6380

APPLICANT: J.A. JOHNSON CONST & CUSTOM HOMES Mailing Address: 1055 Highway Rot 173 Friendship Lane
City: Erwin State: NC Zip: 28334 Phone #: (919) 427-8464
919-820-1438

PROPERTY LOCATION: State Road #: 1703 SR Name: Red Hill Church Rd
Parcel: 021519 0034 10 PIN: 1519-89-6118.000
Zoning: RA30 Subdivision: Benwin L Strickland Lot #: 2 Lot Size: .60
Flood Plain: X Panel: 110 Watershed: N/A Deed Book/Page: 2271/658 Plat Book/Page: 2005/10665
2264.901

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
Hwy 27 to Coats to Red Hill Ch Rd turn right 1/4 mile on left before Stricklands Boarding

PROPOSED USE:

- SFD (Size 50 x 107) # Bedrooms 3 # Baths 2 Basement (w/wo bath) N/A Garage yes Deck yes Crawl Space Slab
- Modular: ___ On frame ___ Off frame (Size ___ x ___) # Bedrooms ___ # Baths ___ Garage ___ Deck ___
- Multi-Family Dwelling No. Units ___ No. Bedrooms/Unit ___
- Manufactured Home: ___ SW ___ DW ___ TW (Size ___ x ___) # of Bedrooms ___ Garage ___ Deck ___
- Number of persons per household 2
- Business Sq. Ft. Retail Space ___ Type ___
- Industry Sq. Ft. ___ Type ___
- Church Seating Capacity ___ Kitchen ___
- 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 (Need to fill out New Tank Checklist) Existing Septic Tank County Sewer Other

Erosion & Sedimentation Control Plan Required (usually if clearing over 1 acre)? 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	35	91'
Rear	25	107'
Side	10	15'
Corner	20	N/A
Nearest Building on same lot	10	47'

Comments:
Ref: 0650015939 -> storage
No revision fee, - only name changed. a/dickson

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. This permit is subject to revocation if false information is provided on this form.

Signature of Owner or Owner's Agent: J.P. Johnson

Date: 10/25/06

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

A RECORDED SURVEY PLAT AND RECORDED DEED (OR OFFER TO PURCHASE) ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY

8/06 10/26 N

Record

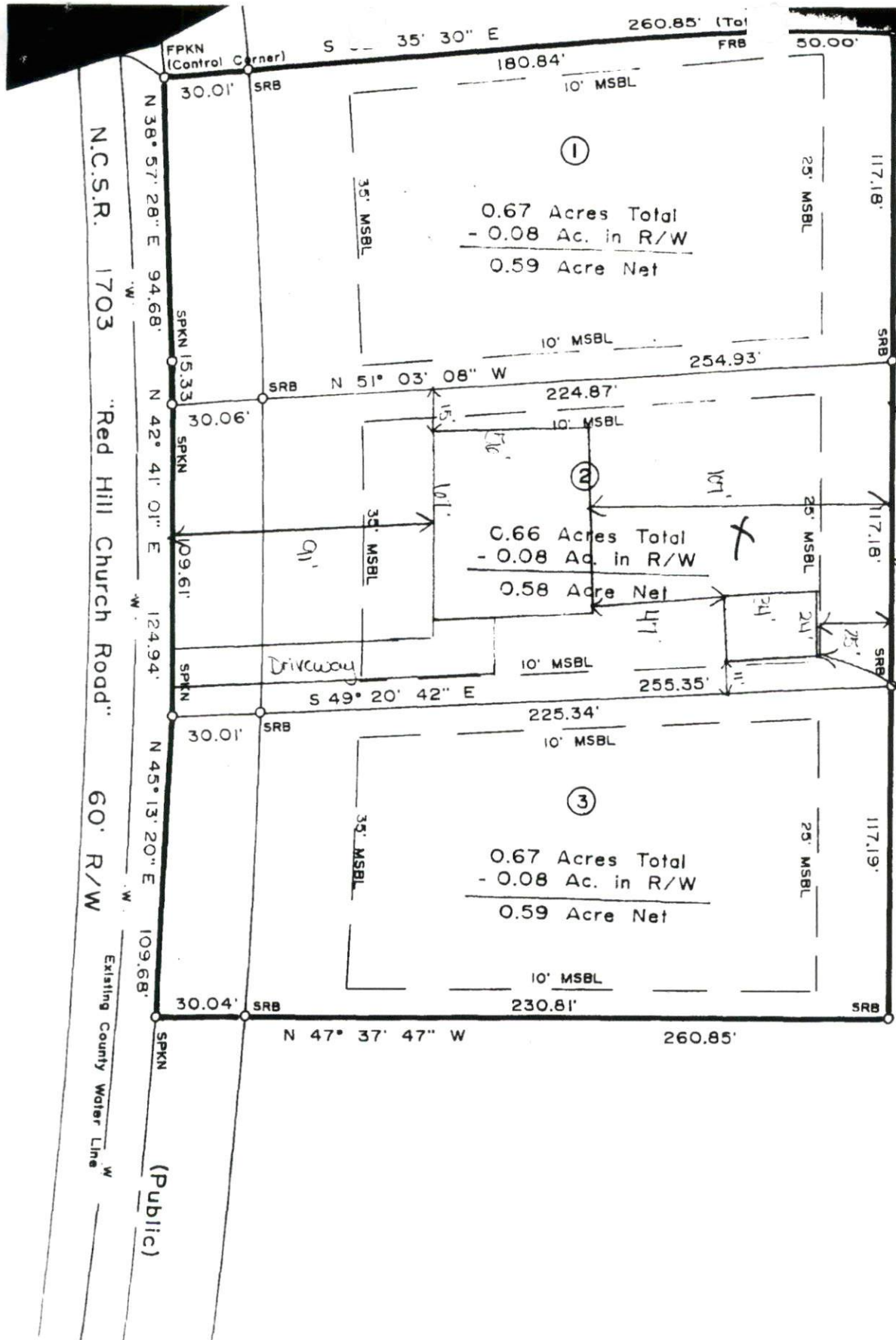
PLAN APPROVAL

DISTRICT FRD USE SED

COMS 3

10-25-06 ~~11-13-06~~ *A. Duggan*
Deputy Assessor
Proprietor: Strickland

Proposed
Stick



NOTE: Survey of Lot No. 1 (0.67 acre total), Lot No. 2 (0.66 acre total) and Lot No. 3 (0.67 acre total) being a portion of that tract deeded to Belvin L. Strickland as recorded in Deed Book 366, Page 486, Harnett County Register.

ZON

OWNER NAME: Larry Turlington

APPLICATION #: 15751

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.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-25-06
10-13-06
DATE