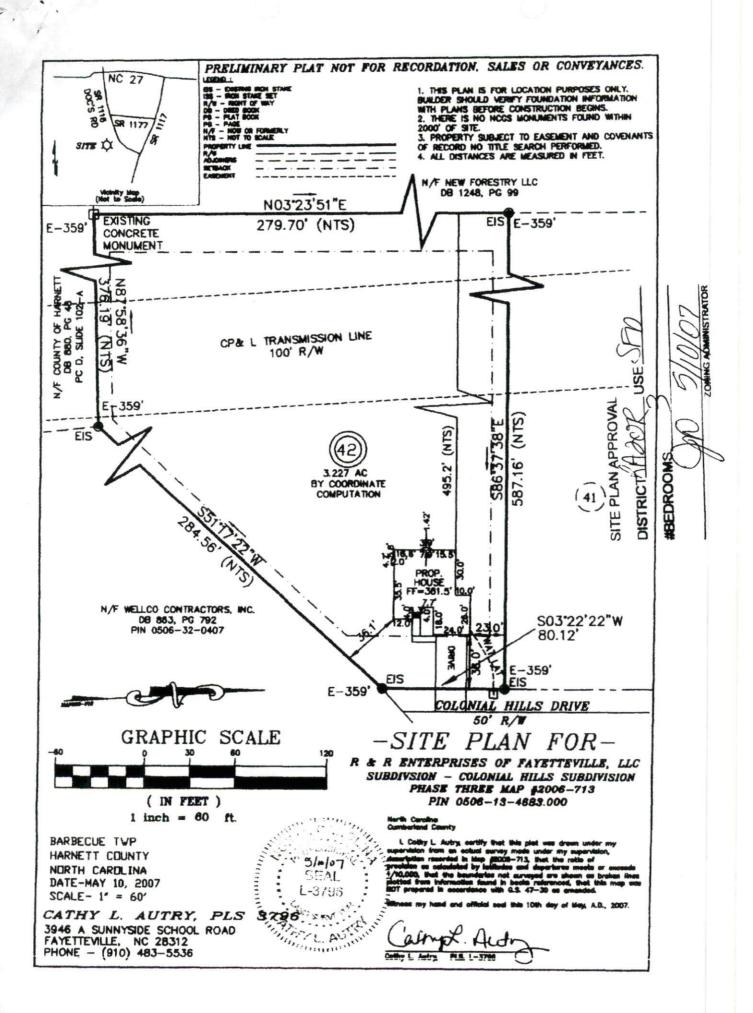
Initial Application Date: 10 10 500 159 160 R
COUNTY OF HARNETT LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (940) 893-7525 Fax: (910) 893-2793 www.hamett.org
LANDOWNER: A:DK VARYES Mailing Address: PO Box 5508
City: Vine hurst State: M Zip: 26-374 Home #: Contact #:
APPLICANT*: Mailing Address:
City:State:Zip:Home #:Contact #:* *Please fill out applicant information if different than landowner
PROPERTY LOCATION: State Road #: //// State Road Name:
Parcel 0:30507-0226-60 PIN: 10 0506-14-8386,000
Zoning: Af 20 Subdivision: Calonial Hills Lot #: 42 Lot Size: 3,227
Flood Plain: Panel: 50 Watershed: 114 Deed Book/Page: 1893/856 Plat Book/Page: 2006/113
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 20 high on how how
higher an Acrosery and left on Dois all
I mile on tost.
PROPOSED USE: 49 x 55 Circle: SFD (Size ## x 65) # Bedrooms 3 # Baths 2 Basement (w/wo bath) 4 Garage Deck N Crawl Space / Slab
Modular:On frameOff frame (Sizex) # Bedrooms # Baths Garage (site built?) Deck (site built?) Multi-Family Dwelling No. Units No. Bedrooms/Unit
Manufactured Home:SWDWTW (Sizex) # BedroomsGarage(site built?) Deck(site built?)
Business Sq. Ft. Retail Space
Industry Sq. Ft
Church Seating Capacity # Bathrooms Kitchen
☐ Home Occupation (Size x) #Rooms UseHours of Operation:
Accessory/Other (Sizex) Use
Addition to Existing Building (Size x Use Closets in addition(_)yes (_)no
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
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 250004 (Manufactured Homes Other (specify)
Required Residential Property Line Setbacks: Comments:
Front Minimum 35 Actual 36
Rear 25 5H 49 5/10 austrana Changed house
Side 10 20,5325'
Corner/Sidestreet 20 M/A
Nearest Building 10 W/A on same lot
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 of plans
submitted. I hereby state 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.
10/12/01
1011.6106
Signature of Owner or Owner's Agent Date

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

Please use Blue or Black Ink ONLY

8/06

5/11 S



HTE#06.500 15960 Harnett County Department of Public Health 23386

Improvement Permit

A building permit ca	cannot be issued with only an Improvement Permit
001-01	PROPERTY LOCATION: // 6
	SUBDIVISION Colonial Hills LOT # 42
NEW REPAIR □ EXPANSION □	Site Improvements required prior to Construction Authorization Issuance:
Type of Structure: SFO 43×65 302	
Proposed Wastewater System Type: Convolume	
Projected Daily Flow: 363 GPD	
Number of bedrooms: Number of Occupants:	max
Basement Yes No	d basis and describe of failure
Pump Required: ☐Yes → No ☐ May be required based on fina Type of Water Supply: ☐ Community ☐ Public ☐ Well Dis	al location and elevations of facilities stance from well 5 feet Permit valid for: Five years
Provide contract to the community of Public of Well Dist	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Permit conditions: Mect so, to Maintain All STUD at Plubing Mallow At you	and level is higher Librar Chalin
State of The ging It will an August	cond feet o fifth after
Λ	11.0
Authorized State Agent::	Date: 11-9-06 SEE ATTACHED SITE SKETCH
	ssuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting
their requirements. This site is subject to revocation if the site plan, plat, or the in	ntended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This
permit is subject to compliance with the provisions of the Laws and Rules for Sewa	age Treatment and Disposal and to conditions of this permit.
Cons	struction Authorization
	(Required for Building Permit)
	, 1956, 1957, 1958, and 1959 are incorporated by references into this permit and shall be met. Systems shall be
installed in accordance with the attached system layout.	, 1739, 1737, 1730. and 1737 are incorporated by references into this period and small of med systems small of
ISSUED TO: ADR PARTNER!	PROPERTY LOCATION: ///
133620 101.	SUBDIVISION COTONIAL HILLS
Facility Type: SFD 40x65 3.01 X New	ew Expansion Repair
Basement? Yes No Basement Fixtures? Yes	W L Expansion L nepair
<u> </u>	(Initial) Wastewater Flow: 363 GPD
Type of Wastewater System** Convertised	(Initial) Wastewater Flow: 365 GPD
(See note below, if applicable □) \\ \(\beta \) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	16
	(Repair)
Installation Requirements/Conditions	
	1, 22,
Septic Tank Size 100 gallons Exact length	of each trench 1 > 700 feet Trench Spacing: 9 Feet on Center Il be installed on contour at a Soil Cover: 1 inches
Maximum Trei	ench Depth of: inches (Maximum soil cover shall not exceed
	oms shall be level to $\pm \frac{1}{4}$ " 36" above the trench bottom)
in all directio	AND STATE OF
Pump Requirements:ft. TDH vs GPM	
Tump nequirements.	Aggregate Depth: inches below pipe
C	/ =
Conditions:	
**If applicable: I understand the system type specified is a	different from the type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	
	e intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership
of the site. This Construction Authorization is subject to compliance with the provisi	sions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.
() A 11	SEE ATTACHED SITE SKETCH
Authorized State Agent:	Date:
6	Date: 11-9-0 L onstruction Authorization Expiration Date: 11-5-201
/	

Harnett County Department of Public Health Site Sketch

