

Initial Application Date: 11-7-06

Application # 0650016124
1306893

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: SCOTT LEE HOMES, INC Mailing Address: PO BOX 748

City: CLAYTON State: NC Zip: 27520 Home #: 9195532085 Contact #: 9195532085 *Darin*

APPLICANT: SCOTT LEE HOMES, INC Mailing Address: PO BOX 748 *919-369-1862*

City: CLAYTON State: NC Zip: 27520 Home #: 9195532085 Contact #: 9195532085

Please fill out applicant information if different than landowner

PROPERTY LOCATION: State Road #: 1452 State Road Name: TRUE LOVE

Parcel: 6506350163 42 PIN: 035-58-6184.000

zoning: RA200M Subdivision: Jonathan Ridge Lot #: 26 Lot Size: .81

Flood Plain: X Panel: D10 Watershed: NA Deed Book/Page: 02246057 Plat Book/Page: 2006-166

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

210 Twrds Angier left onto 55hwy to 42thru Fuquay left onto Truelove Sub is on right

PROPOSED USE:

- SFD (Size 58 x 43) # Bedrooms 4 # Baths 2.5 Basement (w/wo bath) included Garage 360 Deck 119 Crawl Space Slab
- Modular: On frame Off frame (Size x) # Bedrooms # Baths Garage (site built?) Deck (site built?)
- Multi-Family Dwelling No. Units No. Bedrooms/Unit
- Manufactured Home: SW DW TW (Size x) # Bedrooms Garage (site built?) Deck (site built?)
- Business Sq. Ft. Retail Space Type # Employees: Hours of Operation:
- Industry Sq. Ft. Type # Employees: Hours of Operation:
- Church Seating Capacity # Bathrooms Kitchen
- Home Occupation (Size x) # Rooms Use Hours of Operation:
- Accessory/Other (Size x) 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 1 prop Manufactured Homes Other (specify)

Required Residential Property Line Setbacks: Comments:

Front	Minimum	Actual
Front	35	35.9
Rear	25	55
Side	10	11
Corner/Sidestreet	20	
Nearest Building on same lot	10	

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.

Signature of Owner or Owner's Agent [Signature]

Date 11-7-06

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

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

11/13 N

COPY

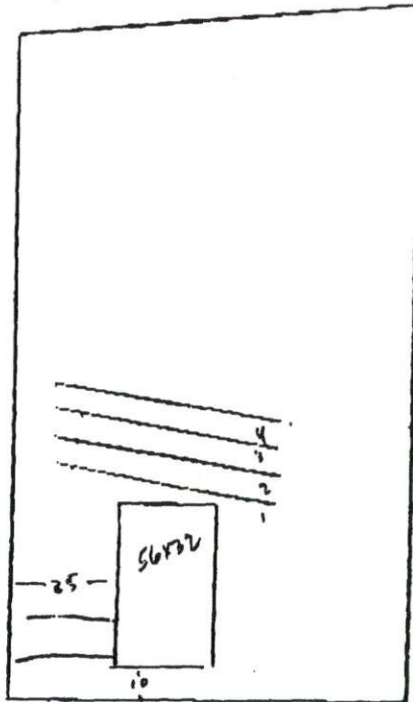
Scott Leathman
Jonathan Ridge
Lot 26
1" = 60'

MARIA B

Adrian
St.

#	C	L
1	Y	75
2	B	75
3	R	75
4	Y	75

.6 LTAR
Accepted System & Repair



OWNER NAME: SCOTT LEE HOMES, INC.

APPLICATION #: 0650016124

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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

11-7-06
DATE