

Initial Application Date: 02 NOV 06

Application # 0650010154

Owner: Ever Par Dev LLC

Central Permitting 108 E. Front Street, Lillington, NC 27546

COUNTY OF HARNETT LAND USE APPLICATION

Phone: (910) 893-7525

Fax: (910) 893-2793

1309818

www.harnett.org

APP: THE QUEST DEV. CO. INC.

Mailing Address: P.O. Box 2121

City: DUNN State: NC Zip: 28335 Home #: 910-567-4686 Contact #: 910-237-1853

APPLICANT: HOWELL EDWARDS Mailing Address: SAME

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____
*Please fill out applicant information if different than landowner

PROPERTY LOCATION: State Road #: 1125 State Road Name: LEMUEL BLACK RD

Parcel: 01 0525 01 0095 08 PIN: 90

Zoning: RA-20R Subdivision: GATE WEST Lot #: 8 Lot Size: 44872(SF)

Flood Plain: X Panel: 155 Watershed: NA Deed Book/Page: OTP Plat Book/Page: 2006/078

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 210 WEST TO ANDERSON CREEK RD. TR. THEN RIGHT ON LEMUEL BLACK RD. SUB DIVISION ON RIGHT

PROPOSED USE:

- SFD (Size 63 x 60) # Bedrooms 3 # Baths 2 1/2 Basement (w/w bath) No Garage YES Deck No Circle: 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 proposed Manufactured Homes ___ Other (specify) ___

Required Residential Property Line Setbacks: Comments: _____

	Minimum	Actual
Front	35	50
Rear	25	250
Side	10	18
Corner/Sidestreet	20	X
Nearest Building on same lot	10	X

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.

Signature of Owner or Owner's Agent 

Date 02 NOV 03

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

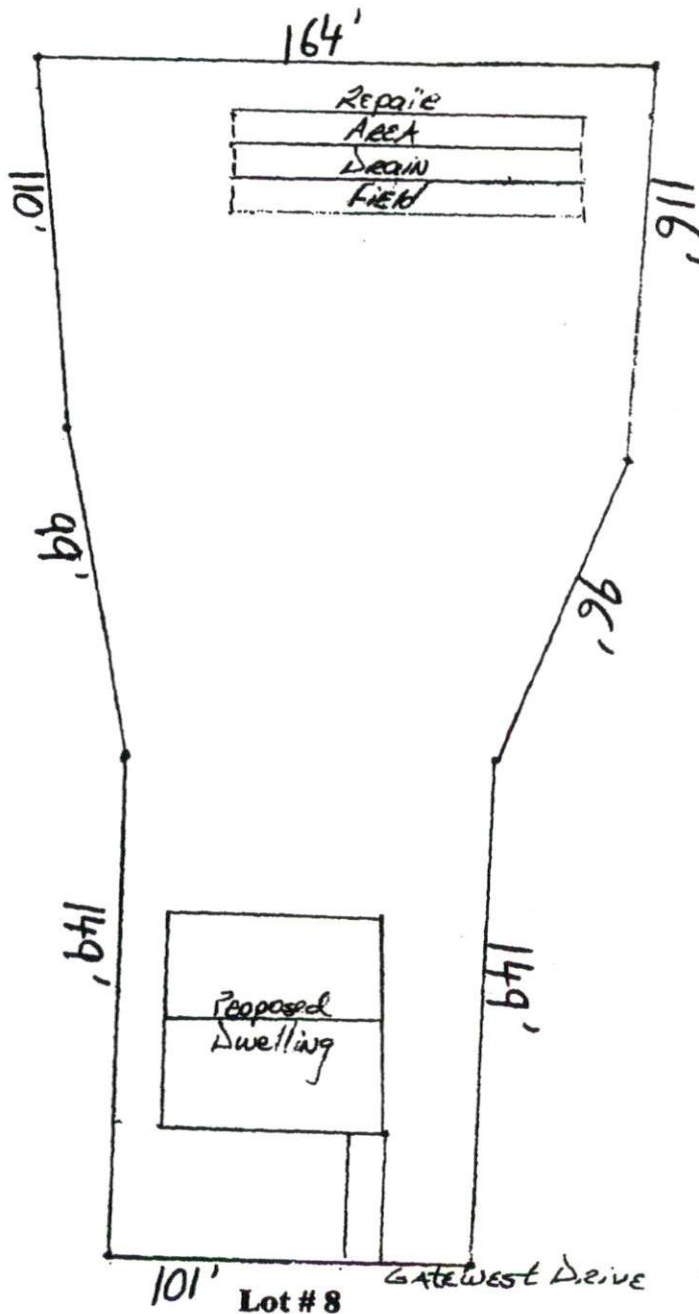
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY

11/16/05

**GateWest Subdivision
 Lemuel Black Road (SR1125)
 Anderson Creek, Harnett County, North Carolina**

Drain Field - Repair
Lines 24" x 3' wide
9' ON CENTERS x 100'
Washed Stone
 1" = 50'



OWNER NAME: THE QUEST DEV. CO. INC.

APPLICATION #: 0650010154

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)

02 Nov 03
DATE