

Initial Application Date: 8 MAY 07

Application # 0750017507

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: PRICE BUILDERS Mailing Address: 80 RUSSELL DRIVE

City: ERWIN State: NC Zip: 28339 Home #: 910 263 0433 Contact #:

APPLICANT*: RUSSELL PRICE Mailing Address: 80 RUSSELL DRIVE

City: ERWIN State: NC Zip: 28339 Home #: 910 263 0433 Contact #: 910 263 0433

*Please fill out applicant information if different than landowner

PROPERTY LOCATION: Subdivision: MAME BELL Ridge Ph 1 Lot #: 67 Lot Size: .50

Parcel: 13-0630-01-0029-07 PIN: 0630-55-4396.000

Zoning: R930 Flood Plain: X Panel: 620 Watershed: N/A Deed Book&Page: 2371/291 Map Book&Page: 2007/256

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Old 421 out of Lillington
About 3 miles, turn left. Go about 500' and turn
left. on right.

PROPOSED USE: 101x42

SFD (Size 15 x 54) # Bedrooms 3 # Baths 2 1/2 Basement (w/wo bath) _____ Garage Deck 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 _____) **MUST** have operable water before final

Sewage Supply: New Septic Tank (Must 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	35	Actual	35
Rear	25	135'	143.0	
Side	10	28.0		
Sidestreet/corner lot	20			
Nearest Building on same lot	6			

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.

Russell Price
Signature of Owner or Owner's Agent

8 MAY 07
Date

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

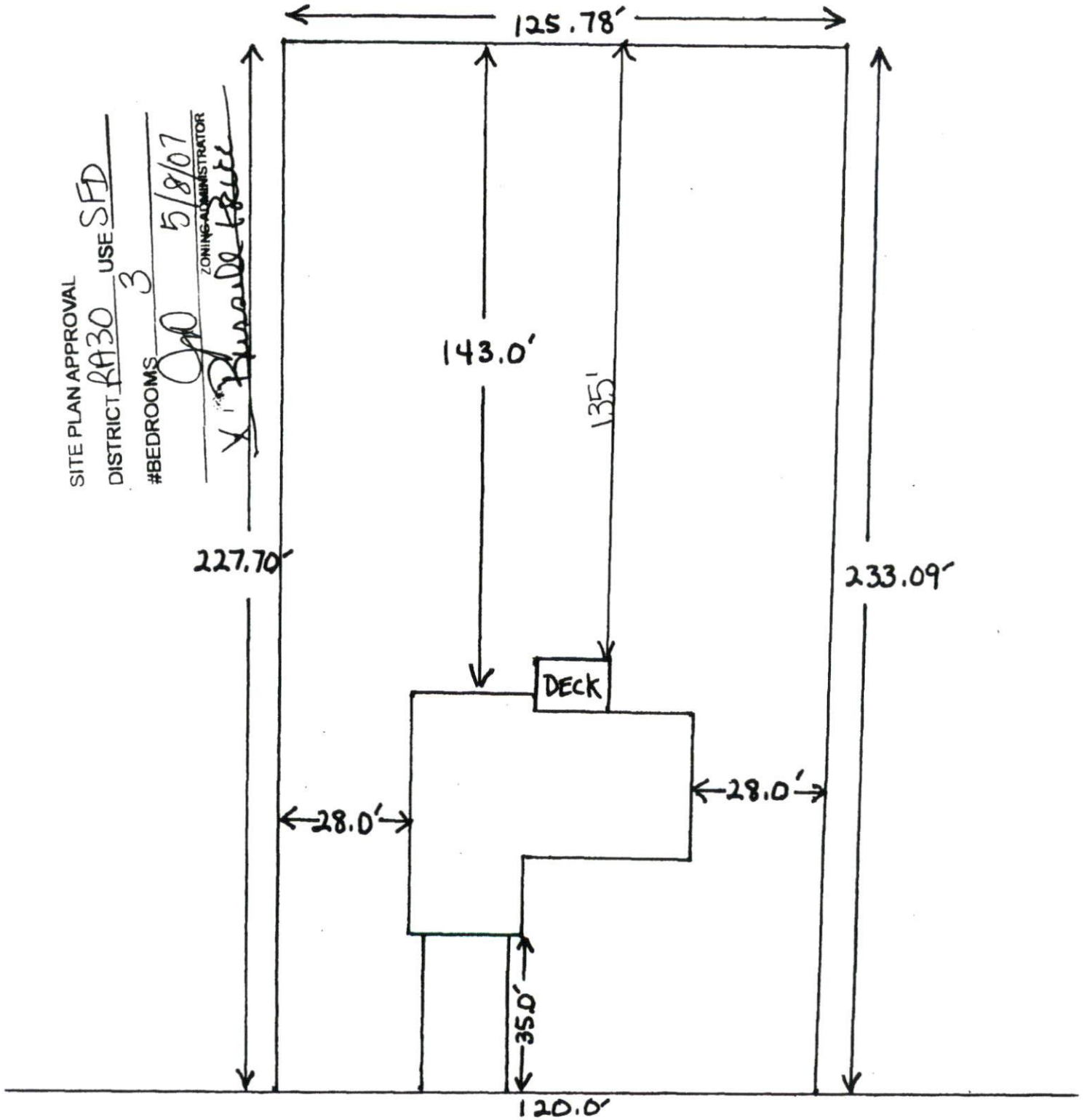
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY

5/17/07

MAME BELL RIDGE Lot-67
ENGINEER 30 SCALE

SITE PLAN APPROVAL
DISTRICT RA30 USE SFD
#BEDROOMS 3
5/8/07
ZONING ADMINISTRATOR
V. P. Russell



BELLA HOWINGTON DRIVE

OWNER NAME: RUSSELL PRICE

APPLICATION #: 0750017507

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?
- { } YES { } NO Does the site contain any existing water, cable, phone or underground electric lines?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

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.

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

8 MAY 07
DATE