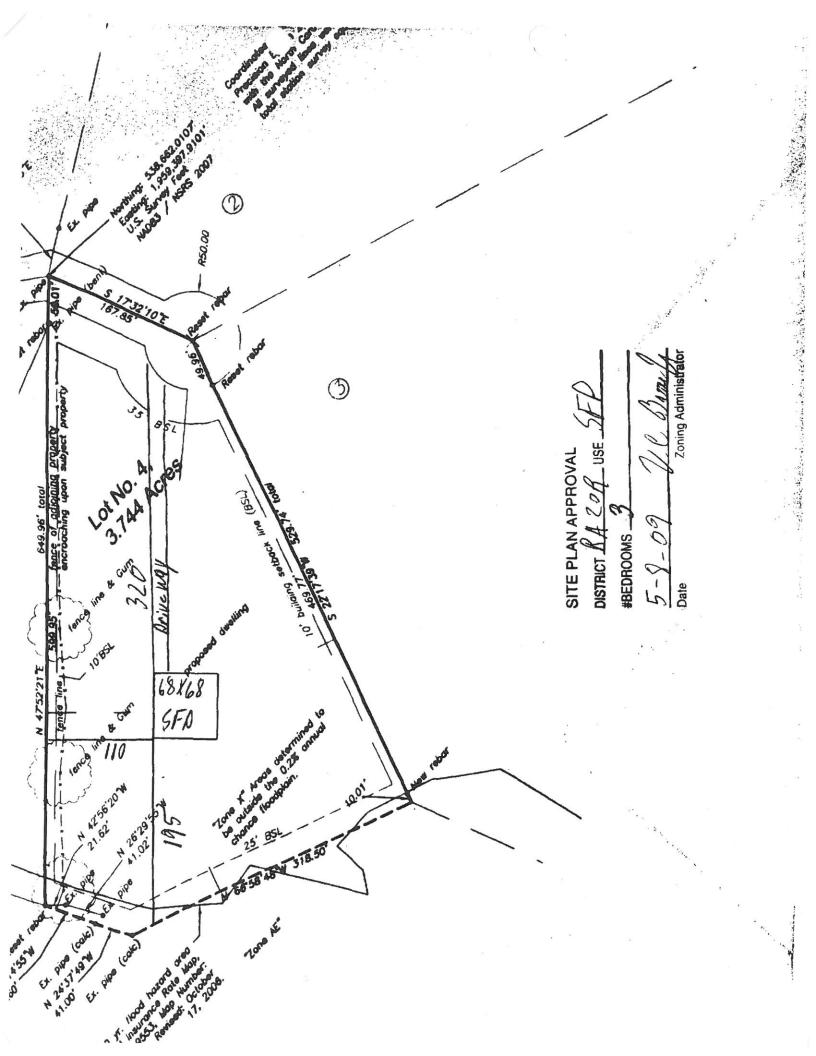
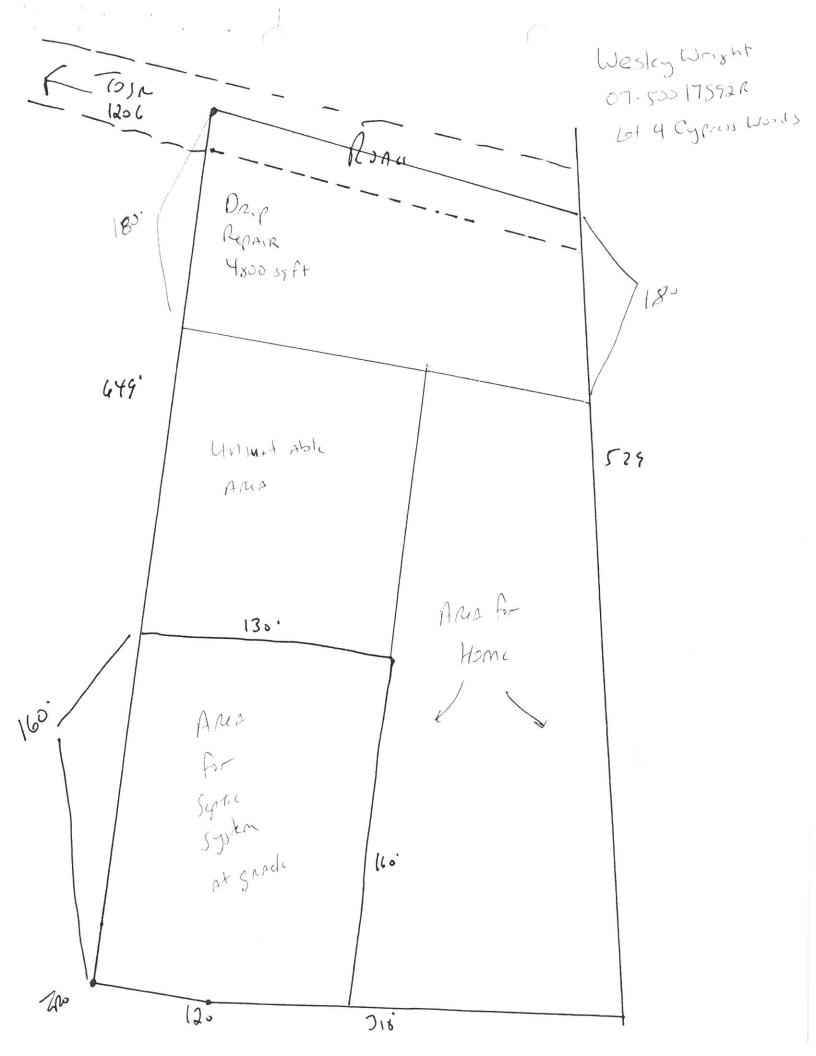
	Deve of the Charles
	(m) - Revi nano change
	5-7-09 SCANNED
	57107
	Initial Application Date: The Application # 0 1000 1754 of the App
	2/12/17
	COUNTY OF HARNETT LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fav. (910) 893-2752
	Www.namett.org
	LANDOWNER: _ Joshua McAuly Mailing Address: 5322 5/erra ct
	TANK HAVINA I I I I I I I I I I I I I I I I I I
0.0	Contact #: 110 2 63 3 9 7 9
lak	APPLICANT: SAME Mailing Address:
	City: State: NC zip: fome # Contact #:
	Please fill out applicant information if different than landowner
	PROPERTY LOCATION: Subdivision: CUDICSS WOODS Lot #: 4 Lot Size: 4 ACTCS
	Parcel: 0995640112031 PIN: 955 398 1391
	COORD V OVEZ
	Zoning: PH-BOX Flood Plain: X Panel: 1000 Watershed: Deed Book&Page: 263 15 Map Book&Page: 200 Z 5 17
	SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
	HWY87 N to HWY 24127 goto Hillman Grove RC
	turn(B) and ap 9,200x, 4mi turn(1) anto
	Turn Conto
	- (ypress was en,
	PROPOSED USE DO AL S. Circle
	SFD (Size # Bedrooms # Baths Basement (w/wo bath) Garage Crawl Spady
	Modular:On frameOff frame (Sizex) # Bedrooms # Baths Garage(site built?) Deck (site built?)
	□ Multi-Family Dwelling No. UnitsNo. Bedrooms/Unit
	☐ Manufactured Home:SWDWTW (Sizex) # BedroomsGarage(site built?) Deck(site built?)
	U Business Sq. Ft. Retail SpaceType# Employees:Hours of Operation:
	☐ Industry Sq. Ft
	Church Seating Capacity # Bathrooms Kitchen
	Home Occupation (Size x # Rooms Use Hours of Operation:
	Accessory/Other (Sizex) Use
	Addition to Existing Building (Size x) Use Closets in addition(_)yes (_)no
	Vor NOlines current
	Water Supply: (Y) County (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?
	Structures on this tract of land: Single family dwellings NOD Manufactured Homes Other (specify) None Required Residential Property Line Setbacks: Comments: 7113107
	200
	Front Minimum 35 Actual AST 320 Revision - Per Customer
	Rear 25 200 HH195 moved house
	Side 10 +07 493 / 110 5-7-09 BR Now Out Clause 6:6
	The state of the s
1	Move house wife U11662
	Nearest Building 6
	on same lot
	f 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.
•	Milmolatinapple asent 5-21-07 5/8/09
	Signature of Owner or Owner's Agent
	"This application expires 6 months from the initial date if no permits have been issued" PPC & 5/11/09
	A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION
. ,	
X	Please use Blue or Black Ink ONLY
1.1	Note 5-7-09





Map # 2002-517 CXPRESS WOODS EN SPINE C SR 1206 60' RNV SR 1206 60' RNV CSA COURS LAVE THE METTER AN

HADREL & CAIN PLS I SASS CERTIFY DANS NO HERE CAN MANAGEMENT STATES Mile a. a. GRAPHIC SCALE - FEET 2002 5 OF TAKE O CHECK Sacy voics NA NATION AND AND AND THE PROPRIES USE ALES, CROSS AND STOLE LAM S. CHITCH OF MICHAELT SHOWN THAT IS CHIMES US AND AND FOR PRO-CHICA IS CHIMES US AND FOR THE PRO-FILED AND LAWFELL TO THE AND A STREETING OF THE STOLE AND LAWFELL Muchas a.c.s.

MAP# 2002 - 517

OWNERNAME: Gregory Purnsley

APPLICATION #: 07500 17592

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

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				
X	New single family r	residence		
	Expansion of existing system			
	Repair to malfunctioning sewage disposal system			
	Non-residential type of structure			
WA	TER SUPPLY			
	New well			
8	Existing well			
	Community well	ii iii		
X	Public water			
0 9	Spring			
Are t	here any existing w	vells, springs, or existing waterlines on this property?		
{}}	yes (v) no (_	_} unknown		
			ž.	
<u>SEPTIC</u> 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		
1	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 {X} NO	Does the site contain any Jurisdictional Wetlands?		
{}}	YES {\\ \) NO	Does the site contain any existing Wastewater Systems?		
{_}}`	YES {\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	Is any wastewater going to be generated on the site other than domestic sewage?		
{_}}	YES {\leqself} NO	Is the site subject to approval by any other Public Agency?		
{_}}	YES (X) NO	Are there any easements or Right of Ways on this property?		
{_}}	YES (X) 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.				
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE To be a signature of the signatur				
		11		