



Initial Application Date: 10-30-07 when confirmed Application # 07 500 18772B

11/8/07

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

CU

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org

Applicant: R.L. Properties Mailing Address: P.O. Box 2050

City: Angier State: NC Zip: 27501 Home #: 639-4295 Contact #: Ashley

APPLICANT*: same as above Mailing Address: _____

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ashley Langdon Phone #: 639-4295

PROPERTY LOCATION: Subdivision: Pope Lake Lot #: 3 Lot Size: 51

State Road #: 1566 State Road Name: Pope Lake Rd Map Book & Page: 99/15

Parcel: 04 0692 0006 04 PIN: 0692-38-8054.000

Zoning: RA-30 Flood Zone: X Watershed: N/A Deed Book & Page: 0TP

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 to Angier, right on 210, go approx. 6 miles, left on Old Stage Rd go to water tower take a right, 1st left is Pope Lake, lot is at the end of the road on right.

PROPOSED USE: (Include Bonus room as a bedroom if it has a closet) Circle:
 SFD (Size 43' x 43') # Bedrooms 4 # Baths 3 Basement (w/wo bath) Garage 2 Deck 12x12 Crawl Space / Slab
 Mod (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Site Built Deck _____ ON Frame / OFF _____
 Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms _____ Garage _____ (site built? _____) Deck _____ (site built? _____)
 Duplex No. Buildings _____ No. Bedrooms/Unit _____
 Home Occupation # Rooms _____ Use _____ Hours of Operation: _____ # Employees _____
 Addition/Accessory/Other (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 (Complete New Tank Checklist) (_____) Existing Septic Tank (_____) County Sewer
Property owner of this tract of land own land that contains a manufactured home w/in live hundred feet (500') of tract listed above? (_____) YES NO
Structures (existing or proposed): Single family dwellings SFP Manufactured Homes _____ Other (specify) _____

Required Residential Property Line Setbacks:
Front Minimum 35 Actual 47 54
Rear 25 30 130
Closest Side 10 106 44
Sidestreet/corner lot 20
Nearest Building on same lot 10
Comments: Revision - Per Env. Health No Fee. Customer called Bryan. Disregard this Revision

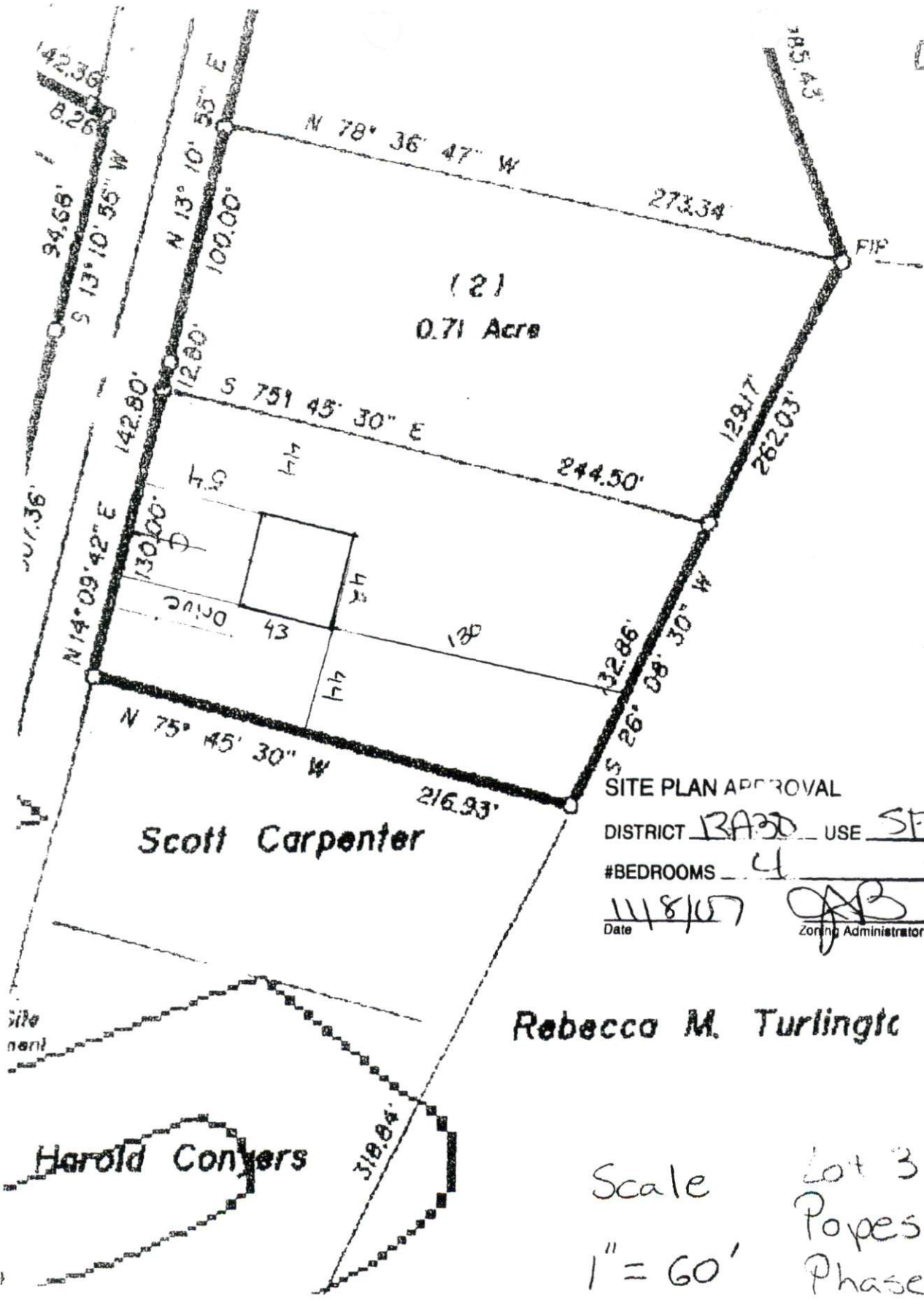
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent: [Signature] Date: 10-30-07

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

12/17 N



(2)
0.71 Acre

Scott Carpenter

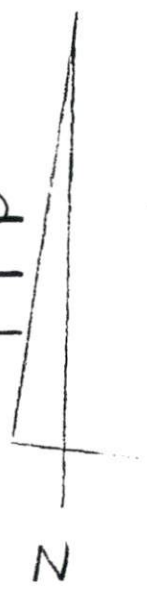
Harold Conyers

SITE PLAN APPROVAL
 DISTRICT RA-30 USE SFD
 #BEDROOMS 4
 Date 11/8/07
 Zoning Administrator [Signature]

Rebecca M. Turlingtc

Scale Lot 3
 Popes Lake
 1" = 60' Phase #1

R.L. Properties
 Book # 99-15





Initial Application Date: 10-30-07

Application # 0750018774

CU _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org

LANDOWNER: Bill Pope Mailing Address: PO Box 979

City: Coats State: NC Zip: 27501 Home #: 639-4002 Contact #:

APPLICANT*: R.L. Properties Mailing Address: P.O. Box 2050

City: Angier State: NC Zip: 27501 Home #: Contact #: 919-639-4295

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ashley Langdon Phone #: 639-4295

PROPERTY LOCATION: S. Division: Pope Lake Lot #: 2 Lot Size: .74

State Road #: 1566 State Road Name: Pope Lake Rd. Map Book & Page: 900

Parcel: 04 0692 0005 PIN: 0692-37-7788.000

Zoning: RA-30 Flood Zone: X Watershed: N/A Deed Book & Page: OTP

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

210 to Angier, right onto 55 go 6 mi Right on Old Stage, go to water tower take a right, left on Pope lake, lot on the right at end of road.

PROPOSED USE:

(Include Bonus room as a bedroom if it has a closet)

Circle:

- SFD (Size 30 x 60) # Bedrooms 4 # Baths 3 Basement (w/wo bath) _____ Garage 2 Deck 12x12 Crawl Space Slab
- Mod (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Site Built Deck _____ ON Frame / OFF
- Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms _____ Garage _____ (site built? _____) Deck _____ (site built? _____)
- Duplex No. Buildings _____ No. Bedrooms/Unit _____
- Home Occupation # Rooms _____ Use _____ Hours of Operation: _____ #Employees _____
- Addition/Accessory/Other (Size _____ x _____) Use _____ Closets in addition (_____) yes (_____) no

Water Supply: County (_____) Well (No. dwellings _____) MUST have operable water before final

Sewage Supply: New Scott Tank (Complete New Tank Checklist) Existing Septic Tank (_____) County Sewer

Property owner of this tract of land own land that contains a manufactured home w/tn five hundred feet (500') of tract listed above? (_____) YES NO

Structures (existing or proposed): Single family dwellings SFD Manufactured Homes _____ Other (specify) _____

Comments:

Required Residential Property Line Setbacks:

Front	Minimum <u>35</u>	Actual <u>45</u> ✓
Rear	<u>25</u>	<u>100</u> ✓
Closest Side	<u>10</u>	<u>30</u> ✓
Sidostreet/corner lot	<u>20</u>	
Nearost Building on same lot	<u>10</u>	

Please call Ashley at (919) 795-5632 when enviromental people go to this lot. * see septic note *

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted.

I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

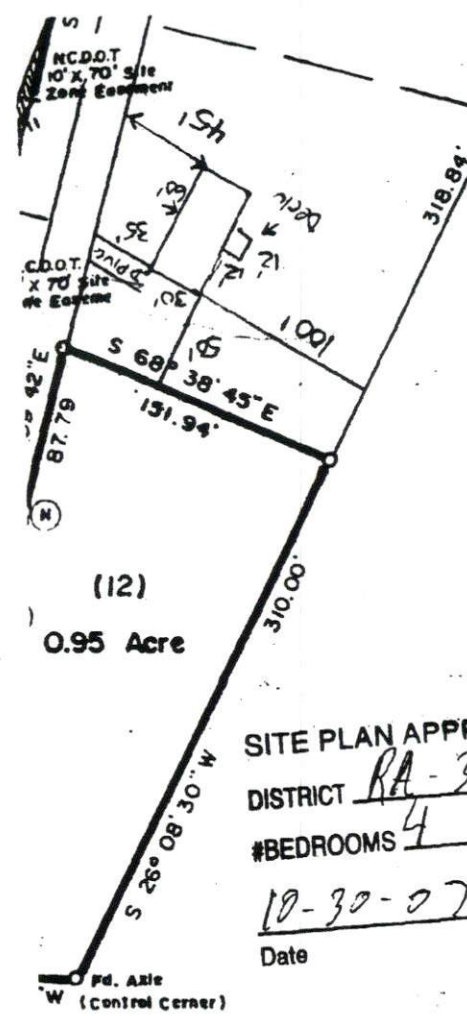
Signature of Owner: [Signature]

Date: 10-30-07

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

10/31 N



Rebecca M. Turlington

NOTE: Deed Ref

Point	Bearing	Distance
A to B	N 75° 52' 58" W	40.00'
B to C	N 88° 17' 28" W	46.54'
D to E	S 63° 27' 16" E	46.47'
E to F	S 75° 52' 57" E	40.00'
G to H	S 15° 28' 39" W	51.48'
H to I	S 19° 35' 22" W	42.65'
I to J	S 24° 29' 03" W	66.12'
K to L	N 24° 29' 03" E	70.58'
L to M	N 19° 35' 22" E	46.58'
M to N	N 15° 28' 39" E	53.86'

(12)
0.95 Acre

SITE PLAN APPROVAL
 DISTRICT RA-30 USE SFD
 #BEDROOMS 4
10-30-07 V.L. [Signature]
 Date Zoning Administrator

POPE'S LANDING PHASE I

PROPERTY OF:

WILLIAM RAY POPE

P.O. Box 979, Crawford Road, Coats, N. C. 275
 Phone (910) 897-6171

BLACK RIVER TWP., HARNETT C

SURVEY BY: PIEDMONT SURVE

P.O. Box 115, Dunn, N.C. 283:
 Phone (910) 892-2511

ZONE: RA-30

JULY 26, 1995



REVISION: OCTOBER 9, 1995

Lot #7

OWNER NAME: RL Properties

APPLICATION #: 0750018772
0750018774

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.

Deborah S. Sandon
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

11-1-07
DATE