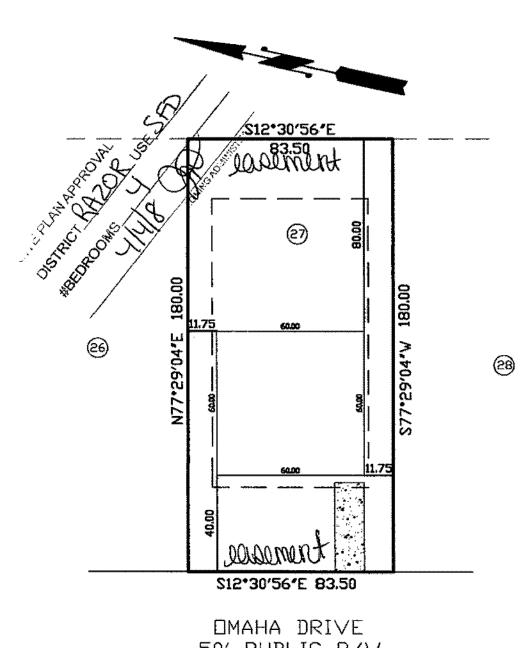
Initial Application Date: 3-27-08	Application # 0850019801		
County OF HARNETT LAND USE Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-	E APPLICATION 7525 Fax: (910) 893-2793 www.hamett.org		
LANDOWNER: WYNN CONSTRUCTION Mailing Address:	1696 Hayes RJ.		
City: Crued mour State: NC Zip: 22522 Horne #: 910			
APPLICANT*: WYNN CONSTRUCTION Mailing Address:	1696 Hayes Rd-		
City: Crued moor State NC Zip: 27.532 Home #: 9/9 521/317 Contact #: 9/9 114-5570 *Please fill out applicant information if different than landowner			
PROPERTY LOCATION: Subdivision: Tinger Point	Lot#: 27 Lot Size: . 385		
Parcel: 039576-0088-27 PIN: 959	7 -36-5416.000		
Zoning: RADOR Flood Plain: 1/ 0 Parlet: Watershed: NA Deed Book&Page: 243050 (Map Book&Page: 2007/7//			
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 74 KG 27 W Past Western Harvett Histoched			
PROPOSED USE:	Oleston		
2 SFD (Size 60 x 60) # Bedrooms 4 # Baths 2 Basement (w/wo bath)	Garage YS Deck Craw Space YSlab		
☐ Modular: _On frame _Off frame (Size _ x _) # Bedrooms _ # Baths _			
Multi-Family Dwelling No. UnitsNo. Bedrooms/Unit	-		
Manufactured Home:SWDWTW (Sizex) # Bedrooms	Garage(site built?) Deck(site built?)		
☐ Business Sq. Ft. Retail SpaceType	# Employees: Hours of Operation:		
O Industry Sq. FtType	# Employees:Hours of Operation:		
☐ Church Seating Capacity # Bathrooms Kitchen			
	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 (Complete New Tank Checklish) () Existing Septic Tank () County Sewer () Other Properly owner of this tract of land own land that contains a manufactured home wiln five hundred feet (500') of tract listed above? () YES () NO Structures on this tract of land: Single family dwellings / DOManufactured Homes Other (specify)			
Required Residential Property Line Setbacks: Comments:			
Front Minimum 35 Actual YO			
Rear <u>25</u> <u>60</u>			
Side 10 //-75			
Sidestreet/corner tot 20			
Nearest Building 6 on same fot			
If permits are granted I agree to conform to all ordinances and the taws of the State of	f North Carolina regulating such work and the specifications of plans		
submitted. I hereby state that the foregoing statements are accurate and correct to the information is provided on this form.	e best of my knowledge. This permit is subject to revocation if false		
Tellett	3-27-00		
Signature of Owner or Owner's Agent	Date		
William manifestian annima i anniha ina ini ini ini	*** *** *** ********		

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



50' PUBLIC R/W

This map was prepared from recorded data, as noted, and from other sources provided by the diviner this is a prelidiolary site plan, differed for planding use unly and in no vay represents a survey made by this company, thus map is not differed for recordation, conveyances, or sales.

Charlie T. Carpenter, P.L.S.

Professional Land Surveyor

1940 Juniper Church Road Four Oaks, NC 27524

(919) 963-2909

(919) 320-5281

PRELIMINARY SITE PLAN FUR:

CONSTRUCTION $\mathsf{W}\mathsf{Y}\mathsf{N}\mathsf{N}$

PIN 9597-36-5416.000 PARCEL ID 039576 0088 27 LUT 27 TINGEN PUINTE S/D PB2007 PG711-718

3/20/08 1'=40'

185 DMAHA DRIVE BRDADVAY, NC 27505

OWNERNAME: Wynn Construction

0850019794application#: 0850019804

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)

DE	VELOPMENT INFO	RMATION	
8			
	Expansion of existing system		
0	Repair to malfunctioning sewage disposal system		
0	Non-residential type	of structure	
<u>W</u> A	TER SUPPLY	_	
a	New well		
0	Existing well		
0	Community well		
2	Public water		
٥	Spring		
Are	there any existing we	lls, springs, or existing waterlines on this property?	
{}) yes (no (_)	unknown	
Ifa	PTIC applying for authorization Accepted	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
4.444	Alternative	{}} Other	
4400		{}} Any	
	_} Conventional	the local health department upon submittal of this application if any of the following apply to the property in	
		"yes", applicant must attach supporting documentation.	
{_	YES (INO	Does the site contain any Jurisdictional Wetlands?	
{_	YES (INO	Does the site contain any existing Wastewater Systems?	
{	IYES (INO	Is any wastewater going to be generated on the site other than domestic sewage?	
{_	IYES (_TNO	Is the site subject to approval by any other Public Agency?	
{_	YES (NO	Are there any easements or Right of Ways on this property?	
{_	IYES (_TNO	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 H	ave Read This Applicat	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And	
		Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.	
		olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making	
The	Site Accessible So Tha	t A Complete Site Evaluation Can Be Performed.	
	That	4-3-08	
PR	OPERTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE	

