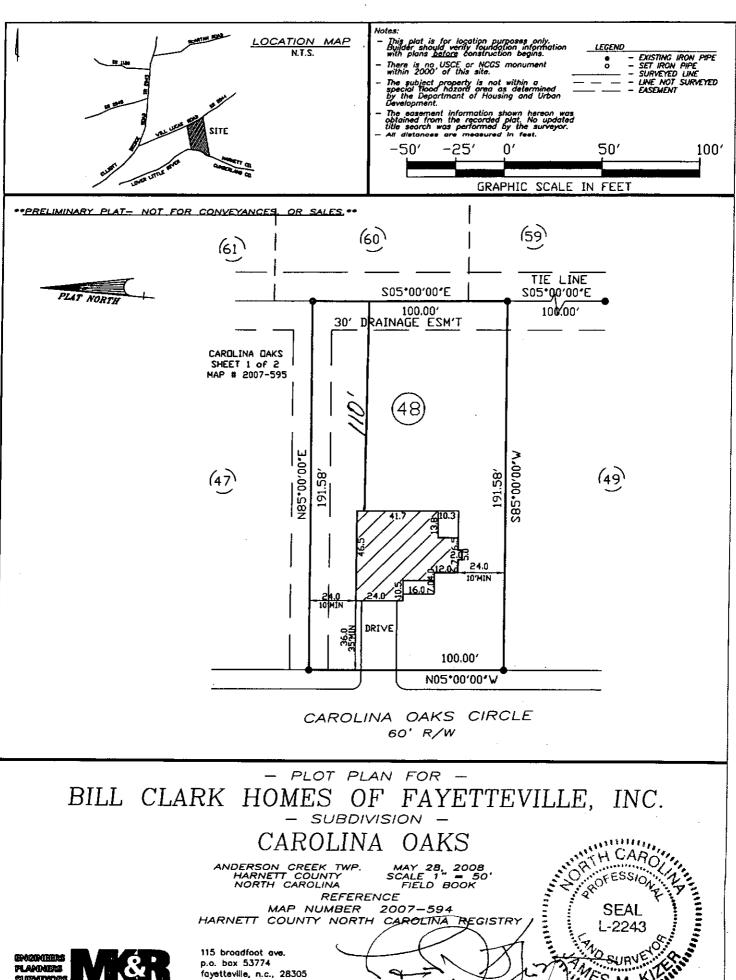
Initial Application Date: 5/28/08	Application # 0850020180
Country OF HARNETT RESIDENTIAL LAI Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7	
LANDOWNER: Bill Clark Homes of Fuyetherike Mailing Address:	400 Westwood Shapping Center Site 220
City: Fuyetterille State: NC Zip: 28314 Home #: 910	7-426-2898 Contact #: 910-426-20.98
APPLICANT*: Mailing Address:	
City:State:Zip:Home #:	· · · · · · · · · · · · · · · · · · ·
*Please fill out applicant information if different than landowner	Gontact #:
CONTACT NAME APPLYING IN OFFICE: J. J. Brenning	Phone #: 910-426-2898 ×307
PROPERTY LOCATION: Subdivision: Carolina Oaks	Lot #: 48 Lot Size: 100 -1916.44 accord
State Road #: 2044 State Road Name: WIII LVCQS	Man Book&Page: 2007 / 595
Parcel: 0105440012 48 PIN: 0534	
Zoning: RA - 20 R Flood Zone: Ma Watershed: Ma Deed Book&Page	
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _ Go West on	
Turn left on 1st Street Turn Rt. on E. Lofton St.	
Follow US 401 Turn Right on Elliot Bridge Rd.	Iven At. on Will Lucas Rd.
Turn Right into Carolina Oaks	
PROPOSED USE: (Include Bonus room as a bedroom if it has a close SFD (Size 52/x 46) # Bedrooms 3 # Baths 2 Basement (w/wo bath) /// Mod (Size x) # Bedrooms # Baths Basement (w/wo bath) Manufactured Home: SW DW TW (Size x) # Bedrooms Duplex No. Buildings No. Bedrooms/Unit Home Occupation # Rooms Use Addition/Accessory/Other (Size x) Use	Garage 2 cm Deck NO Crawl Space Slab Garage Site Built Deck ON Frame / OFF Garage (site built? Deck (site built?) Hours of Operation: #Employees
Water Supply: (County () Well (No. dwellings) MUST have opera Sewage Supply: (New Septic Tank (Complete New Tank Checklist) () Existing S Property owner of this tract of land own land that contains a manufactured home w/in five h Structures (existing or proposed): Single family dwellings Manufactured Homeontes:	able water before final eptic Tank () County Sewer undred feet (500') of tract listed above? ()YES ()NO
Required Residential Property Line Setbacks:	
Front Minimum 35 Actual 36'	
Rear 25 166	
Closest Side/¢	
Nearest Building on same lot	
If permits are granted I agree to conform to all ordinances and laws of the State of North Ca I hereby state that foregoing statements are accurate and correct to the best of my knowled	
	, ,

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





PROF

SURVEYOR

PLANNERS IOORMAN, KIZER & REITZEL, INC.

phone 910-484-5191 FAX 910-484-0388

APPLICATION #: 08500 20180

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)

<u>DE</u>	<u>VELO</u>	PMENT INF	<u>ORMATION</u>			
	New s	ingle family r	esidence			
	Expansion of existing system					
	Repair to malfunctioning sewage disposal system					
	Non-re	esidential type	e of structure			
<u>WA</u>	TER S	SUPPLY	<u> </u>			
O O	New w	veli				
o.	Existir	ng well		•		
	Comm	unity well				
M	Public	water				
	Spring					
Are	there a	ny existing w	ells, springs, or existing waterlines on this property?			
{_}}	yes	{ ⋉ } no {	} unknown			
	TIC oplying	for authorizat	ion to construct please indicate desired system type(s): can be ranked in order of preferen	ce, must choose one.		
	} Acce		{}} Innovative	,		
{}} Alternative		native	{}} Other			
{	} Conv	entional	{}} Any			
The ques	applica tion. I	ant shall notif f the answer i	the local health department upon submittal of this application if any of the following "yes", applicant must attach supporting documentation.	g apply to the property in		
{}}	YES	{ ⋉ } NO	Does the site contain any Jurisdictional Wetlands?			
{}}	YES	{ ⋉ } NO	Does the site contain any existing Wastewater Systems?			
{}}	YES	{ <u>₭</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?			
{}}	YES	{ <u>₭</u> } NO	Is the site subject to approval by any other Public Agency?			
{}}	YES	{ K } №	Are there any easements or Right of Ways on this property?			
{ <u>⋉</u> }	YES	{}} NO	Does the site contain any existing water, cable, phone or underground electric lines	? front curb only!		
			If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service	e.		
I Hav	ve Read	l This Applica	tion And Certify That The Information Provided Herein Is True, Complete And Correct.	Authorized County And		
			d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Ap			
			olely Responsible For The Proper Identification And Labeling Of All Property Lines And at A Complete Site Evaluation Can Be Performed.	d Corners And Making		
11163	3166 ACC	ressinie on 10)	te A Complete Site Evaluation Can be Performed.			
S PRO	PERT	Y OWNER	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	5/28/08		