

Initial Application Date: 7-28-08

Application # 0850020619

CU _____

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

LANDOWNER: Kenneth Cummings LLC Mailing Address: 670 Co. 512 RD

City: Lillington State: NC Zip: 27546 Home #: 910 984-6765 Contact #: 910 984 6765

APPLICANT*: Kenneth Cummings LLC Mailing Address: 670 Co. 512 RD

City: Lillington State: NC Zip: 27546 Home #: 910 984 6765 Contact #: 910 984 6765

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Kenneth Cummings Phone #: 910 984 6765

PROPERTY LOCATION: Subdivision: WOODSHIRE Lot #: 219 Lot Size: 0.348

State Road #: 112.5 State Road Name: Acmeel BLVD Map Book & Page: 2007, 948

Parcel: 01053600 0028 59 PIN: 0506-84-7387.000

Zoning: RH20R Flood Zone: X Watershed: NA Deed Book & Page: 02475 10200 Power Company: South River

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 27 west To Newberry To L. Woodshire To R. Sonoma Lot on left

PROPOSED USE:

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

Circle:

- SFD (Size 56 x 56) # Bedrooms 4 # Baths 3 Basement (w/wo bath) _____ Garage 4x12 Deck 12x14 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 (Size _____ x _____) 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 five hundred feet (500') of tract listed above? ()YES ()NO

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

proposed
Comments: _____

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>26.5</u>
Rear		<u>25</u>		<u>55.1</u>
Closest Side		<u>10</u>		<u>27.5</u>
Sidestreet/corner lot		<u>20</u>		<u>27.5</u>
Nearest Building on same lot		<u>0</u>		<u>-</u>

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]
Signature of Owner or Owner's Agent

7-28-08
Date

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

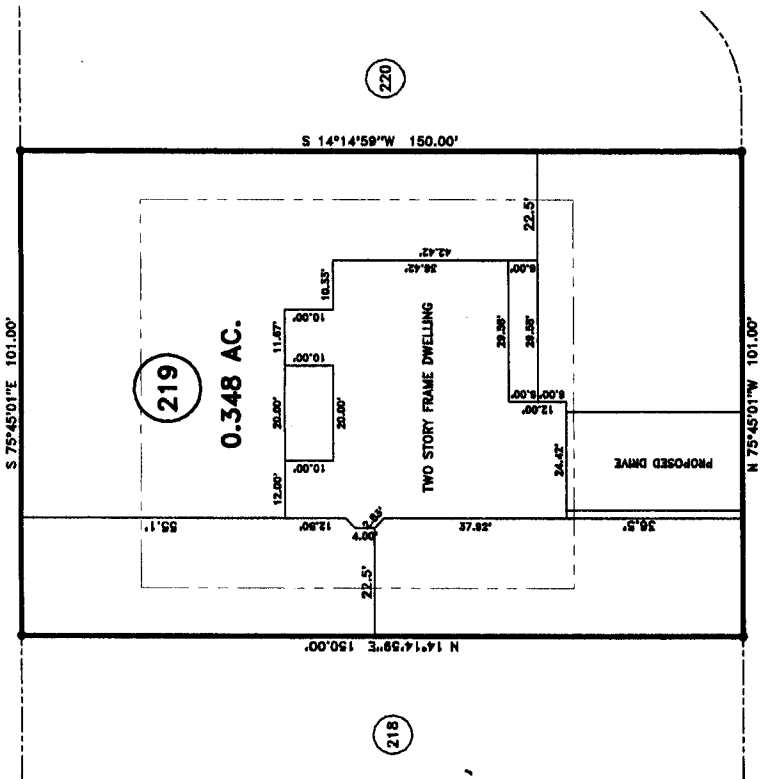
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION
Please use Blue or Black Ink ONLY

SITE PLAN APPROVAL

DISTRICT BA20R USE SFD

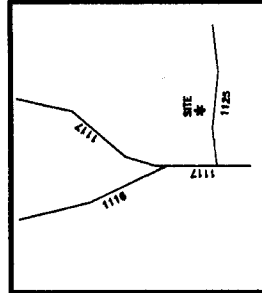
#BEDROOMS 4

Date 7/28/08 JAB
Zoning Administrator



"SONORA DRIVE" 50' R/W

MAP REFERENCE: MAP NO. 2007-948



MINIMUM BUILDING SET BACKS
FRONT YARD --- 35'
REAR YARD --- 25'
SIDE YARD --- 10'
CORNER LOT SIDE YARD --- 20'
MAXIMUM HEIGHT --- 30'

JOB NO. 08364

BENNETT SURVEYS, INC.
1662 CLARK RD., LILLINGTON, N. C. 27546
(910) 893-5252

SURVEY FOR:
PROPOSED PLOT PLAN - LOT - 219
WOODSHIRE S/D, PHASE FIVE

TOWNSHIP ANDERSON CREEK COUNTY HARNETT
STATE: NORTH CAROLINA DATE: JULY 23, 2008

SCALE: 1" = 40'

FIELD BOOK

SURVEYED BY: R/VB
DRAWN BY: R/VB

OWNER NAME: Kenneth Cummings

APPLICATION #: 20619

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.


PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7-28-88
DATE