

Initial Application Date: 7.30.09 2.29.12

Application # 09.50022555

COUNTY OF HARNETT LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793

R. Wilson
www.harnett.org

LANDOWNER: Scott Lee Homes, Inc Mailing Address: 100 Butternut Lane

City: Clayton State: NC Zip: 27520 Home #: 9195532085 Contact #: 9193691862

APPLICANT: Same Mailing Address: _____

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____
*Please fill out applicant information if different than landowner

PROPERTY LOCATION: State Road #: 1452 State Road Name: Truelove

Parcel: 05063500320 PIN: 0635-38-4222-00

Zoning: RA20M Subdivision: Jonathan Ridge Lot #: 9 Lot Size: .525

Flood Plain: V Panel: _____ Watershed: N/A Deed Book/Page: 02261/0057 Plat Book/Page: 2006-166

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 twrds Angeir left onto hwy 55 to hwy42. go thru Fugway turn left onto Truelove right onto Adrian Street.

PROPOSED USE:

- SFD (Size 58x58.4) # Bedrooms 3 # Baths 2.5 Basement (w/wo bath) _____ Garage 592 Deck 126 Crawlspace/Slab _____
- Modular: On frame Off frame (Size x) # Bedrooms # Baths Garage (site built?) Deck (site built?)
- Multi-Family Dwelling No. Units No. Bedrooms/Unit
- Manufactured Home: SW DW TW (Size x) # Bedrooms Garage (site built?) Deck (site built?)
- Business Sq. Ft. Retail Space Type # Employees: Hours of Operation:
- Industry Sq. Ft. Type # Employees: Hours of Operation:
- Church Seating Capacity # Bathrooms Kitchen
- Home Occupation (Size x) # Rooms Use 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) Other

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? YES NO

Structures on this tract of land: Single family dwellings 1 Manufactured Homes _____ Other (specify) _____

Required Residential Property Line Setbacks: Proposed

	Minimum	Actual
Front	35	35.9
Rear	25	45.7
Side	10	24.7
Sidestreet/corner lot	20	43.2
Nearest Building on same lot	10	

If 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.

Quin Wall
Signature of Owner or Owner's Agent

2-29-12
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

MINIMUM BUILDING SETBACKS

FRONT.....35'
 SIDE.....10'
 REAR.....25'

NUMBER	DIRECTION	DISTANCE
L1	N71°03'13"E	50.19'

NUMBER	RADIUS	ARC LENGTH	CHORD DIRECTION	CHORD LENGTH
C1	525.00	134.17	N78°22'28"E	133.80
C2	25.00	39.35	S63°51'49"E	35.41



Rerwold
 SITE PLAN APPROVAL
 DISTRICT RAZOM USE SFD
 #BEDROOMS 3
2-29-12 *cy...*
 ZONING ADMINISTRATOR

NOTES:
 PUBLIC WATER SYSTEM YES NO
 WELL YES NO
 PUBLIC SEWER SYSTEM YES NO
 HOUSE DIMENSIONS: 56' x 40'

DOES LOT HAVE STATE ROAD FRONTAGE? YES NO
 DOES LOT HAVE RECORDED EASEMENT? YES NO

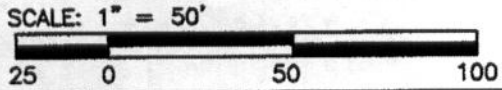
DRIVEWAY OR ACCESS DRIVE DRAINAGE CULVERT
 TYPE AND SIZE _____

IMPERVIOUS SURFACE TABLE

HOUSE.....	1768 SF
DRIVE & WALK.....	792 SF
TOTAL.....	2568 SF
LOT AREA.....	22449 SF
PERCENTAGE OF IMPERVIOUS AREA.....	11.4%

STORMWATER ADMINISTRATOR SIGNATURE _____

PLOT PLAN
 OF
LOT 4
JONATHAN RIDGE
HARNETT COUNTY
 FOR
SCOTT LEE HOMES



TRUE LINE SURVEYING, P.C.



205 W. MAIN STREET
 CLAYTON, N.C. 27520
 TELEPHONE: (919) 359-0427
 FAX: (919) 359-0428
 www.truelinesurveying.com

C-1589

JOB NO: 164.679 DRAWN: MIKE DATE: 3-30-10 CHECKED: CURK

OWNER NAME: SCOTT LEE HOMES, INC.

APPLICATION #: 09.5002.2555 R

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?

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.

Scott Lee Homes, Inc.
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2-29-12
DATE