Initial Application Date:	. = = = = = = = = = = = = = = = = = = =	
Initial Application Date:	Application # 1550035589	
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525	CU#	
CANODANIED (XULLI) HOME (TOTAL	A 2	
City: DUNN State ACC 3 2523 C	100 /21	
City: DUNN State: NCzip: 28335 Contact # 910 -892 APPLICANT*: Cumberland Hours Mailing Address:	O. By 717	
City: State: MC Zip 28.335 Contact # 910 - 892 - *Please fill out applicant information if different than landowner	O. Box 727 4345 Email: Joannorcis Clentury link ne	
CONTACT NAME APPLYING IN OFFICE: JOAN NORM'S	Phone #_ 910-892-4345	
PROPERTY LOCATION: Subdivision: Asheford		
11.0	Lot #: 8Lot Size: , 35	
19575-40 -3798.000 Parce 199575	Map Book&Page: 20081504-510	
Zoning: 21-202 Flood Zone: Watershed: VA Deed Book&Page: 02 546, 04	133	
*New structures with Progress Energy as service provider need to supply premise number		
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 27 West 2	from Progress Energy	
All All III I I I I I I I I I I I I I I		
and delated the tracks		
an Asherord Way (Th) ON LOCKWOE	D LOT IS ON	
	/	
PROPOSED USE:		
SFD: (Size 457' x 52') # Bedrooms: 3 # Baths 2'2 Basement(w/wo bath) A Garage:	Deck: Crawl Space: Stoby Monolithic	
# Baths Basement (w/wo bath) Garage:	Site Built Deck: On Frame Off Frame	
(10 the second floor fillistical () ves ()no Any other site built add	tioned / Luca / L	
Manufactured Home:SWDWTW (Sizex) # Bedrooms:Garage: Duplex: (Sizex) No. Buildings:No. Bedrooms Per Unit:	(site built?) Deck:(site built?)	
Home Occupation: # Rooms: Use: Hours of Operation:		
Water Supply: County Existing Well New Well (# of dwellings using well Sewage Supply: V New Septic Tack (Cornel to Charlet Sewage Sewa	Closets in addition? () yes ()no	
Existing Sentic Tank (Complete Checklish) Existing Sentic Tank (Complete	Charleton	
solving the tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () yes	
(Single lathily dwellings: V Manufactured Homes	Other (specify):	
Comments:		
Front Minimum 23 Actual 40		
Rear 25 97'6"		
Closest Side 10 15		
Sidestreet/corner lot 20 N/A		
Nearest Building on same lot		
If permits are granted I agree to conform to all ordinances and lays of the State of North Carolina regular I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Remit a	ting such work and the specifications of plans submitted.	
I hereby state that foregoing statements are accurate and corner to the best of my knowledge. Permit subject to revocation if false information is provided.		
Signature of Owner or Owner's Agent	Date	

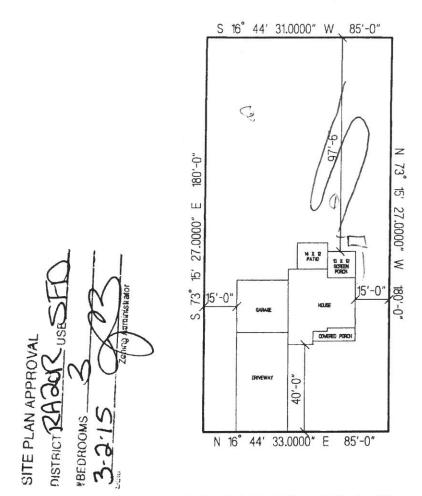
"This application expires 6 months from the initial date if permits have not been issued"

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Residential Land Use Application

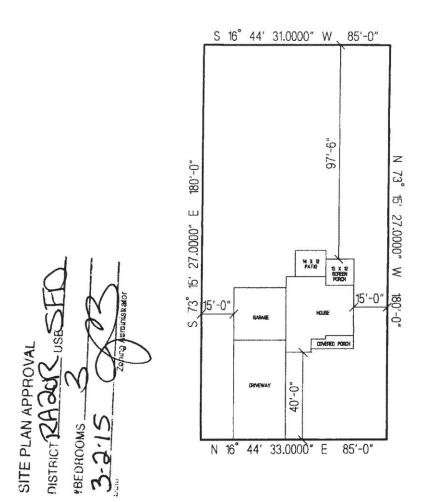
Page 1 of 1

07/10



LOCKWOOD DRIVE

CLASSIC HOME CREATIONS, LLC.
THE CAPE WITH SCREEN PORCH
LOT # 8 ASHEFORD
SCALE: 1"=40'



LOCKWOOD DRIVE

CLASSIC HOME CREATIONS, LLC.
THE CAPE WITH SCREEN PORCH
LOT # 8 ASHEFORD
SCALE: 1"=40'

NAME:		
		APPLICATION #:
C	*This application to be	filled out when applying for a septic system inspection.*
County Healt	h Department Applicat	thed out when applying for a septic system inspection.* tion for Improvement Permit and/or Authorization to Construct FALSIFIED, CHANGED, OR THE STIF IS ALTERED, WILLIAM TO CONSTRUCT
PERMIT OR AUTHOR	ON IN THIS APPLICATION IS	FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
depending upon docum	entation submitted (Carrier S	FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration site plan = 60 months; Complete plat = without expiration
Environmenta	I Health New Contin Cont	CONFIRMATION #
lines must t	pe clearly flagged approxim	visible. Place "pink property flags" on each corner iron of lot. All property stately every 50 feet between corners.
out building	s, swimming pools, etc. Pl	each corner of the proposed structure. Also flag driveways, garages, decks, lace flags per site plan developed at/for Central Permitting.
evaluation t	s thickly wooded, Environn	mental Health requires that you clean out the <u>undergrowth</u> to allow the soil is should be able to walk freely around site. Do not read to allow the soil
All lots to I	be performed. Inspectors	rental Health requires that you clean out the <u>undergrowth</u> to allow the soil usiness days after confirmation, the undergrowth to allow the soil usiness days after confirmation, the confirmation and the undergrowth to allow the soil usiness days after confirmation.
ivi iallure i	O HOCOVOR AUGINA II.A	
200 (4110) 26	Election notification normals	is a series of the series of t
- GO GIICKEG	UV UI IVH IN VARIAL FACILIA	A
Environmental	Health Existing Tank Insp	pections Code 800
possible) and	then mid its to the so	over outlet end of tank as diagram indicates, and the title
ALLOI UILLIVE	TITO DISTINCT AND II AL.	
if multiple pe	rmits, then use code 800) for Environmental Health increases. Since 1 & select notification permit
SEPTIC SEPTIC	ov or IVH to hear results. O	Once approved, proceed to Central Permitting for remains
If applying for authoriza	tion to construct places in disc.	or remaining permits.
() Accented	Constitute please indicate	te desired system type(s): can be ranked in order of preference, must choose one.
		Any
() Alternative	{}} Other	•
The applicant shall notif	y the local health department	linon submittal of this and the state of the
question. If the answer	is "yes", applicant MUST AT	upon submittal of this application if any of the following apply to the property in TTACH SUPPORTING DOCUMENTATION:
}YES ()NO		The state of the s
	Does the site contain any Ju	urisdictional Wetlands?
(1)	Do you plan to have an imi	gation system now or in the future?
(_)YES (_Y)NO	Does or will the building co	ontain any drains? Please explain.
(_)YES (_V),NO	Are there any existing wells	s, springs, waterlines or Wastewater Systems on this property?
YES (_Y)NO	Is any wastewater going to	be generated on the site other than domestic sewage?
(_)YES (_V)NO	Is the site subject to approve	al by any other Public Agency?
I IVEC I	September 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 19	The state of the s

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.

Does the site contain any existing water, cable, phone or underground electric lines?

PROPER POWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Are there any Easements or Right of Ways on this property?