

2nd

Initial Application Date: 5/11/09

Application # 0950022062 Storage CU                     

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

LANDOWNER: Brian K Bales Mailing Address: 113 Quail Run  
City: Smithfield State: NC Zip: 27577 Home #:                      Contact #:                     

APPLICANT: Whittenton Builders Mailing Address: 1055 Tilghman Rd  
City: Dunn State: N.C. Zip: 28324 Home #:                      Contact #: (919) 427-8464  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: J Percy Whittenton Sr. Phone #: (919) 427-8464

PROPERTY LOCATION: Subdivision:                      Lot #: 2 Lot Size: 3.02 AC  
State Road #: 1707 State Road Name: Neighbors Rd Map Book & Page: 2006/801  
Parcel: 021529 0069 02 PIN: 1528-35-4687 000  
Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 022357 0415-0TP

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 421 TO DUNN TURN R. ON 301 N TO Neighbors Rd Lot 1 1/2 miles on left

PROPOSED USE:

- SFD (Size 60 x 70) # Bedrooms 3 # Baths 2 1/2 Basement (w/wo bath)                      Garage 546 Deck                      Crawl Space / Slab
- Mod (Size                      x                     ) # Bedrooms                      # Baths                      Basement (w/wo bath)                      Garage                      Site Built Deck                      ON Frame / OFF
- Duplex No. Buildings                      No. Bedrooms/Unit
- Manufactured Home:                      SW                      DW                      TW (Size                      x                     ) # Bedrooms                      Garage                      (site built?                     ) Deck                      (site built?                     )
- Home Occupation # Rooms                      Use                      Hours of Operation:                      #Employees
- Addition/Accessory/Other (Size 30 x 60) Use Storage Bldg. Closets in addition ( yes  no)

Adding 2nd Storage Bldg. 36 x 36  
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 1 proposed Manufactured Homes                      Other (specify) 1 proposed Storage

Comments: Storage  
1 Future Pool

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>160</u>	<u>Storage</u>
Rear		<u>25</u>	<u>29</u>	<u>107</u>	<u>115 to Bldg.</u>
Closest Side		<u>10</u>		<u>112</u>	
Sidestreet/corner lot		<u>-</u>		<u>-</u>	<u>4/24 house moved per customer</u>
Nearest Building on same lot		<u>10</u>	<u>50</u>	<u>62</u>	<u>50'</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 of Owner or Owner's Agent: J Percy Whittenton Sr.

Date: 2-25-08 Ref #s: 0850019504  
0850019505



OWNER NAME: Brian K Bales

APPLICATION #: 22062

**\*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.**

*Brian K Bales*  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2/26/08  
DATE