

2-12-01

Revised 15 Aug 02

01-50001263

COL OF HARNETT LAND USE APPLICATION

Planning Department 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793

LANDOWNER: Regency Homes, Inc Address: 6506 Dental Lane Ste 201
City: Fayetteville State: NC Zip: 28314 Phone #: 910-424-0455

APPLICANT: Regency Homes, Inc Address: 6506 Dental Lane Ste 201
City: Fayetteville State: NC Zip: 28314 Phone #: 910-424-0455

PROPERTY LOCATION: SR #: 1115 SR Name: Buffalo Lake Rd.
Parcel: 03958703 0020-60 PIN: 9587-60-4428.000
Zoning: RA 30 Subdivision: Peachtree Crossing 2 Lot #: 26 Lot Size: 20,229 SF
Flood Plain: X Panel: 0075 Watershed: NA Deed Book/Page: OP Plat Book/Page: E/1447D

DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

PROPOSED USE:

- (X) Sg. Family Dwelling (Size 48 x 62) # of Bedrooms 3 Basement - Garage yes Deck yes
( ) Multi-Family Dwelling No. Units No. Bedrooms/Unit
( ) Manufactured Home (Size x ) # of Bedrooms Garage Deck included in total size.
( ) Number of persons per household
( ) Business Sq. Ft. Retail Space Type
( ) Industry Sq. Ft. Type
( ) Home Occupation (Size x ) # Rooms Use
( ) Accessory Building (Size x ) Use
( ) Addition to Existing Building (Size x ) Use
( ) Other

Water Supply: (X) County ( ) Well (No. dwellings ) ( ) Other

Sewer: (X) Septic Tank/ Existing: YES (NO) County ( ) Other

Erosion & Sedimentation Control Plan Required? YES (NO) Proposed

Structures on this tract of land: Single family dwellings (X) Manufactured homes Other (specify)

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)

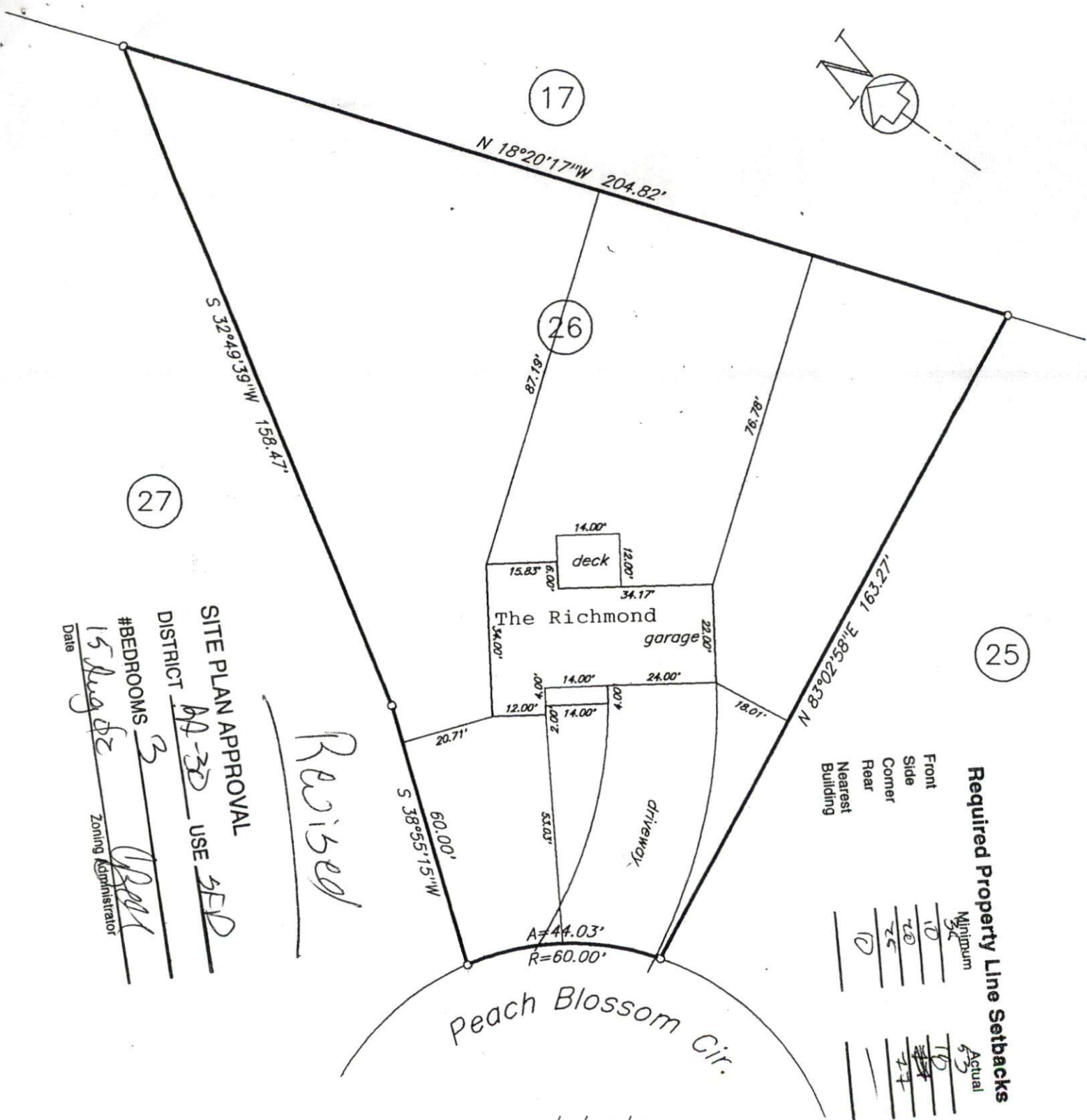
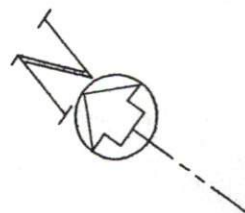
Table with 5 columns: Required Property Line Setbacks, Minimum, Actual, Minimum, Actual. Rows include Front, Side, Nearest Building, Rear, Corner.

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 or plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Signature of Applicant (Jenny Pucylonske)

Date 2/12/01

# 724 8/21 5



*Revised*

SITE PLAN APPROVAL  
 DISTRICT MA-3D USE SEF  
 #BEDROOMS 3  
 Date 15 Aug 82  
 Zoning Administrator [Signature]

**Required Property Line Setbacks**

Minimum	Actual
Front	10
Side	20
Corner	26
Rear	10
Nearest Building	10

plot plan  
 Owner: Regency Construction  
 Subdivision: Peachtree Crossing, Phase One  
 Map Cab: F Slide: 747-D

HARNETT COUNTY HEALTH DEPARTMENT  
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 17630. This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.

Owner or Authorized Agent Regency Homes

Name: \_\_\_\_\_ Telephone # 424-0455

Address: \_\_\_\_\_

Property Location: SR # 1115 Road Name \_\_\_\_\_

New Installation  Repair \_\_\_\_\_ Septic Tank  Nitrification Lines

Subdivision Peach Tree Crossing Lot # 24

Number of Bedrooms Proposed: \_\_\_\_\_ Lot size: 20,000 sq ft

Basement \_\_\_\_\_ With Plumbing \_\_\_\_\_ Without Plumbing \_\_\_\_\_

Water Supply: Well \_\_\_\_\_ Public  Minimum Well Setback: \_\_\_\_\_ ft.

Type of System: Conventional \_\_\_\_\_ Other

Tank Volume: Septic Tank 1000 gallons Pump Chamber 1000 gallons

**Nitrification Field Specifications**

Number of fields 1 Number of Lines per Field 3 Length of lines 100

Width of ditches 3 ft. Depth of ditches 18-24 inches

French Drain: Linear feet required \_\_\_\_\_ Depth of gravel \_\_\_\_\_

No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the improvement permit and that a valid operations permit has been issued.

Authorized Agent for Harnett County Health Department

Name: Joe Waters Date: 02-23-01

