

Initial Application Date: 03/28/02

Application #: 02-50004332 R

COUNTY OF HARNETT LAND USE APPLICATION
Central Permitting
102 E. Front Street, Lillington, NC 27546
Phone: (910) 893-4759 Fax: (910) 893-2793

Revised 5/27/03
Flour
Charged \$25.00

Freddie Joseph

LANDOWNER: JOSEPH FREDDIE Mailing Address: 4761 HWY 210 NORTH
City: ANGIER State: NC Zip: 27501
Phone #: 919-639-7566

APPLICANT: SAME AS ABOVE Mailing Address: _____
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: 1513 SR Name: NEILL'S CREEK ROAD

Parcel: 11-0661-0024-10 PIN: 0661-80-4843

Zoning: RA 30 Subdivision: BAIN & MCRAE Lot #: 7 Lot Size: 10.10

Flood Plain: X Panel: 85 Watershed: IV Deed Book/Page: 01354/0392 Plat Book/Page: F-708-A

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 421 @ NEILL'S CREEK ROAD TURN LEFT ONTO NEILL'S CREEK ROAD APPROX 3/4 MILE LOT # 7 ON THE RIGHT

PROPOSED USE:

- Sg. Family Dwelling (Size 60x20) # of Bedrooms: 3 # Baths: 2.58 Basement (w/wo bath): NA Garage: YES Deck: NA
- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Manufactured Home (Size _____x_____) # of Bedrooms: _____ Garage: _____ Deck: _____
- Comments: _____
- Number of persons per household: 3 Number of Employees at business: _____
- 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: County Well (# dwellings: _____) Other

Sewage Supply: New Septic Tank Existing Septic Tank County Sewer Other

Erosion & Sedimentation Control Plan Required? YES NO

Structures on this tract of land: Single family dwellings: 1 PROPOSED SFD 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

Required Property Line Setbacks:

	Minimum	Actual
Front	35	370 <u>300</u>
Side	10	112 <u>20</u>
Nearest Building	10	NA
Rear	25	200+
Corner	20	NA

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

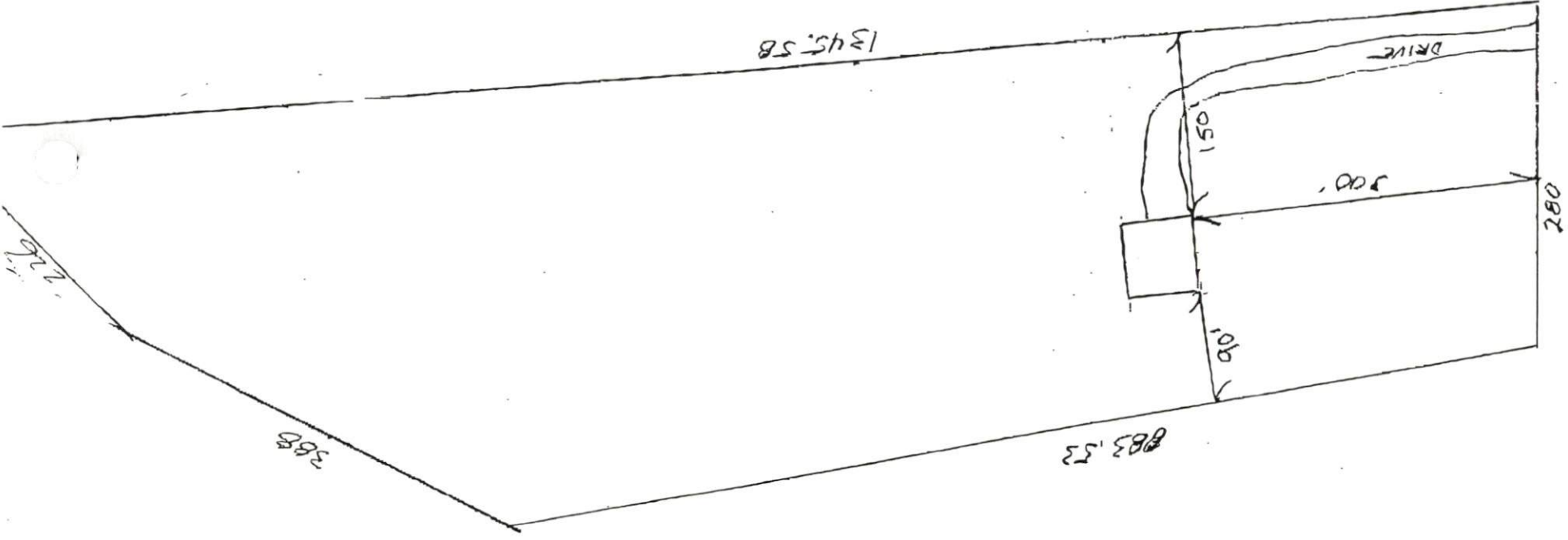
Date

03/28/02

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

A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE PERMIT

369 4/5 N



SITE PLAN APPROVAL
 DISTRICT R430 USE SFD
 #BEDROOMS 3
 DATE 5-07-03
 Zoning Authority *[Signature]*

02-5-4332

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) Freddie Joseph

New Installation Septic Tank

Property Location: SR# 1513 Neill's Creek Rd.

Repairs Nitrification Line

Subdivision Bain + McRae Lot # 7

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 10.10 Ac

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 100 ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Polystyrene Aggregate Trench System IWW-95-32

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 80 ft. width of ditches 3 ft. depth of ditches 18-24 in.

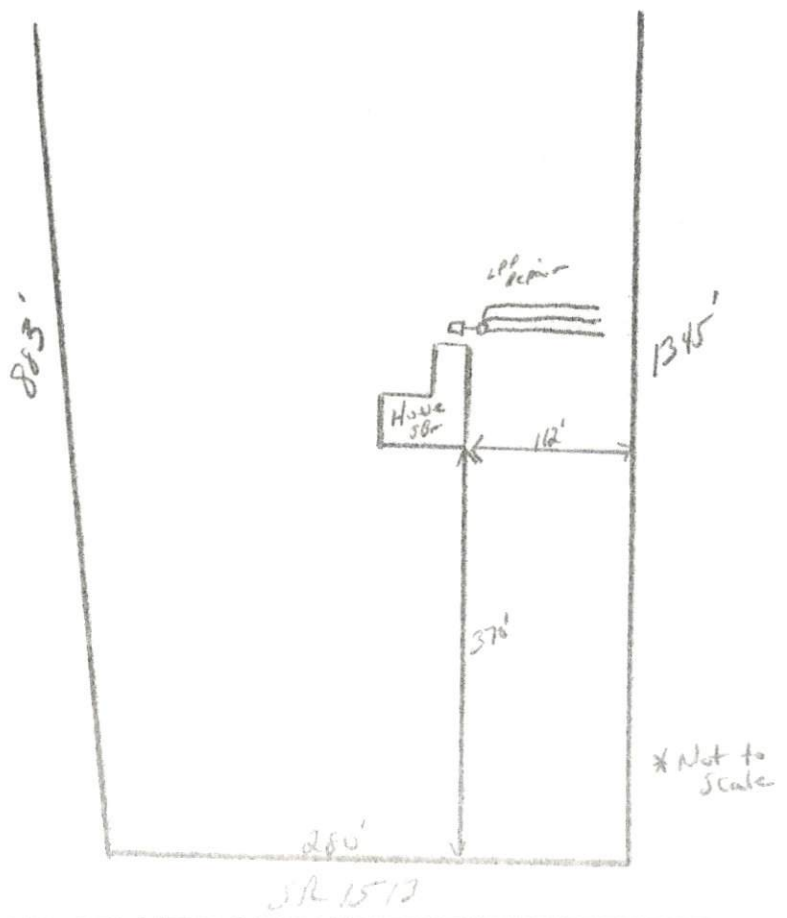
French Drain Required: _____ Linear feet

Date: 4/18/2002

This permit is subject to revocation if site plans or intended use change.

Signed: Bryan M. J. R. S.
Environmental Health Specialist

* Maintain all setbacks
* Round ditches on contour



HARNETT COUNTY HEALTH DEPARTMENT
A) AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 13856. 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.

Freddie Joseph Name 919-639-7566 Telephone #

4761 Hwy 210 North Arden, N.C. 27501 Address

1513 Property Location SR# Mill's Creek Road Name

Baint McRae Subdivision 7 Lot # 3 # Bedrooms Proposed 10.10 Ac Lot size

TYPE OF SYSTEM

New Installation Repair Septic Tank Nitrification Lines

Conventional Other Polystyrene Aggregate Trench System I WWS-95-3A

Basement With Plumbing Without Plumbing

Water Supply: Well Public - Minimum Well Setback: 100 Ft.

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 3 Length of lines 80 Ft.

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.

Doug McSwain R.S.
Signature of Authorized Agent for Harnett County

4/18/2002
Date