Initial Application Date: 1-1-02 59 CL	HAD 15-04402-5-5019
COUNTY OF HARNE Central Permitting 102 E. Front Street, Lillington, N	C 27546 Phone: (910) 893-4759 Fax: (910) 893-2793
LANDOWNER: Odam Zavestnerts Zav	
City: 1:71/B RIBR State: 50	Zip: 29566 Phone #: 843 - 399 - 1849
City: Forstaillo State: NO	Mailing Address: PU. Box 42535 Zip: 28309 Phone #: 910 424 - 1294
PROPERTY LOCATION: SR #: 2115 SR Name:	attolo loko Del.
Zoring 200 Subdivision: Castrian Esta	PIN: 9587-61-9883.000 34 A Deed Book/Page: Lot #: 44 Lot Size: 1108/19 Plat Book/Page: 98-455
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 10 2 CARSTURIN Estator 124 and	
an IBRT	
☐ Multi-Family Dwelling No. Units No. Bedrooms/Unit Manufactured Home (Sizex) # of Bedrooms Garage _	1/
Number of persons per household	14 detal
Business Sq. Ft. Retail Space	Type CO COCK
☐ Industry Sq. Ft Home Occupation (Size x) #Rooms	TypeUse
Accessory Building (Size x) Use	
Addition to Existing Building (Size x Use	
Other	
Water Supply: (County () Well (No. dwellings)	() Other
Sewage Supply: New Septic Tank Existing Septic Tank	County Sewer () Other
Erosion & Sedimentation Control Plan Required? YES	
Structures on this tract of land: Single family dwellings Manufactured	homes Other (specify)
Property owner of this tract of land own land that contains a man factured from with	n five hundred feet (500') of tract listed above? YES
Required Property Line Setbacks: Minimum Actual	Minimum Actual
Front 35 45	Rear 25 63
Side 10' 20'	Comer 25 N/A
Nearest Building 20	
If permits are granted I agree to conform to all ordinances and the laws of the State of	of North Carolina regulating such work and the specifications or plans submitted.
hereby swear that the foregoing statements are accurate and correct to the best of my	
me and	12 12 1
Signature of Applicant	Date #633 7-10(S)

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

91.5 34 AC 63 1200 034 House 31 × 58 451 110'

> Odon INESTMENTS INC. Lot # 44 CRESTUREN & ceestuien Estates

Required Property Line Setback Front Sina Corner Rear 10'

Placrest

property line.

LE PLAN APPROVAL DISTRICT N/A _USE > #DEDROOMS _ Zoning Administrator . _ .e

acion, drawn snowing: existing and and any wells within 40 feet of your

A recorded deed and recorded plat are also required.

HARNETT COUNTY HEALTH DEPARTMENT

Nº 15844

IM ROVEMENT PERMI

dained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construcany building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit New Installation Septic Tank om the Harnett County Health Department." Nitrification Line Name: (owner) ☐ Repairs Property Location: __ Lot #___44 Quadrant # _____ Subdivision Tax ID #_ _ Lot Size: _ Number of Bedrooms Proposed: ___ Garage: Basement with Plumbing: Community Public Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Pump Tank: _____ gallons Septic Tank: 1000 gallons ft. ditches ____in. Size of tank: width of 3 exact length 80 Subsurface ft. ditches_ of each ditch Drainage Field Linear feet French Drain Required: This permit is subject to revocation if site Signed: Environmental Health Specialist plans or intended use change.

> 25 30 X50 30 X50 30 X50 3BR 30

& maintain o etback & line or conton & Risers + filter required

HADNETT COUNTY HEALTH DEPAR AU1_ORIZATION TO CON

Authorization is hereby given to construct a wastewater system to the special shall be valid for a period not to exceed five (5) years from the date of issuance. This authors will be invalid if ownership, site plans, or intended use change.

Name: Telephone # 499-5485
Name:
Address:
Road Name Road Name
New Installation Repair Septic Tank Nitrification Lines
Subdivision Lot # 44
Subdivision
Number of Bedrooms Proposed: The Lot size:
With Plumbing Without Plumbing
Basement Will Setback: 5 ft.
Water Supply: Well Public Minimum Well Setback: 5 ft.
Other
Type of System: Conventional gallons Tank Volume: Septic Tank
and the design of the second o
Number of fields Number of Lines per Field Length of lines Number of Lines
Number of fields Number of Lines per Field Length of fines
3 inches
Width of ditches ft. Depth of ditches inches
French Drain: Linear feet required Depth of gravel
he any person until an inspection by the
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 Harnett County Health Department permit and that a valid operations permit has been issued.
Harnett County Health Department has determined that the system has been issued. the conditions of the improvement permit and that a valid operations permit has been issued.
the conditions of the improvement p
Name: Melet County Health Department 19/19
Name: Vendet C. Noge Date: Date:
(Pavised 2/96) CNSTRCT. WPD

CC NTY OF HARNETT

Fee: 200 Receipt:

Permit 000860

Date: 2.19.99

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/	LAND USE PERMIT
LANDOWNER INFORMATION:	APPLICANT INFORMATION:
NAME Ted BROWN ADDRESS 2927 18: 12 mg Grove Rd Eameron Ne. 29329 PHONE 4445445 W H	PHONE W H
PROPERTY LOCATION: Street Address Assigned 59 6/11	+side ct/
SR # 1115 RD. NAME Bat Sto lake TOWN	SHIP 03 FIRE RESCUE
TAX MAP NO. 9587 51 PARCEL NO. 3108	FLOOD PLATN PANEL 15
SUBDIVISION Crestview	LOT # 44 LOT/TRACT SIZE
	DEED BOOK 1324 PAGE 283-284
WATSHED DIST. NA WATER DIST.	PLAT BOOKPAGE_04F./e
Give Directions to the Property from Buttalo lake Rd Crestoien	m Lillington: Hwy 27 To
PROPOSED (_) Sg Family Dwelling(Size 60 x 50)	# of Bedrooms Desement Series 12 × 14) Solve 12 × 14) Bedrooms/unit Serage Garage
(_) Industry SqFt No. Rooms/siz	TYPE
(_) Accessory Bldg / Size (_) Addition to Existing Bldg. Size (_) Sign Size Type (_) Other	Use Location
Water Supply: ((()) County (()) Well Sewer: (()) Septic Tank (Existing? Erosion & Sedimentation Control Pla Are there any wells not on this property line (show on Site Pl	n Required? Yes 10 ft of the an).
*NOTE: A Site Plan must be attached to scale on an 8.5 by 11 sho proposed buildings, garages buildings, well, and any we	d to this Application, drawn eet, showing: existing and , driveways, decks, accessory lls within 40 feet of your

A recorded deed and recorded plat are also required.

property line.