

6/28/02

* Permit 2551001 4/20/1997

#15843

Applicant

02-5-5021

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: Odum Investments Inc Mailing Address: 4524 N. Plantation Drive
City: Little River State: SC Zip: 29566 Phone #: 843-399-1849

APPLICANT: Wm. Kent Peris Inc Mailing Address: P.O. Box 42535
City: Fayetteville State: NC Zip: 28309 Phone #: 910-424-1294

PROPERTY LOCATION: SR #: 1115 SR Name: Buffalo Lake Road
Parcel: 039 58707 0020 44 PIN: 9587-60-9943.000
Zoning: N/A Subdivision: Castilian Estates Lot #: 43 Lot Size: 100' X 150'
Flood Plain: X Parcel: 0075 Watershed: N/A Deed Book/Page: OTD Plat Book/Page: 98-455

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: NC 27 WEST - Buffalo Lake Rd - left
into Castilian Estates left onto hedge wood court
lot on left

PROPOSED USE:

- Sg. Family Dwelling (Size 30' x 54') # of Bedrooms 3 # Baths 2 1/2 Basement (w/wo bath) no Garage 24' x 24' Deck 12' x 12'
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____
- Comments: _____
- Number of persons per household 4 (inc)
- 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 _____

included in total size
not included in total size

Water Supply: County Well (No. 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 _____ 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	Minimum	Actual
Front	<u>35'</u>	<u>45'</u>	Rear	<u>25'</u>
Side	<u>10'</u>	<u>23'</u>	Corner	<u>N/A</u>
Nearest Building	<u>20'</u>			

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.

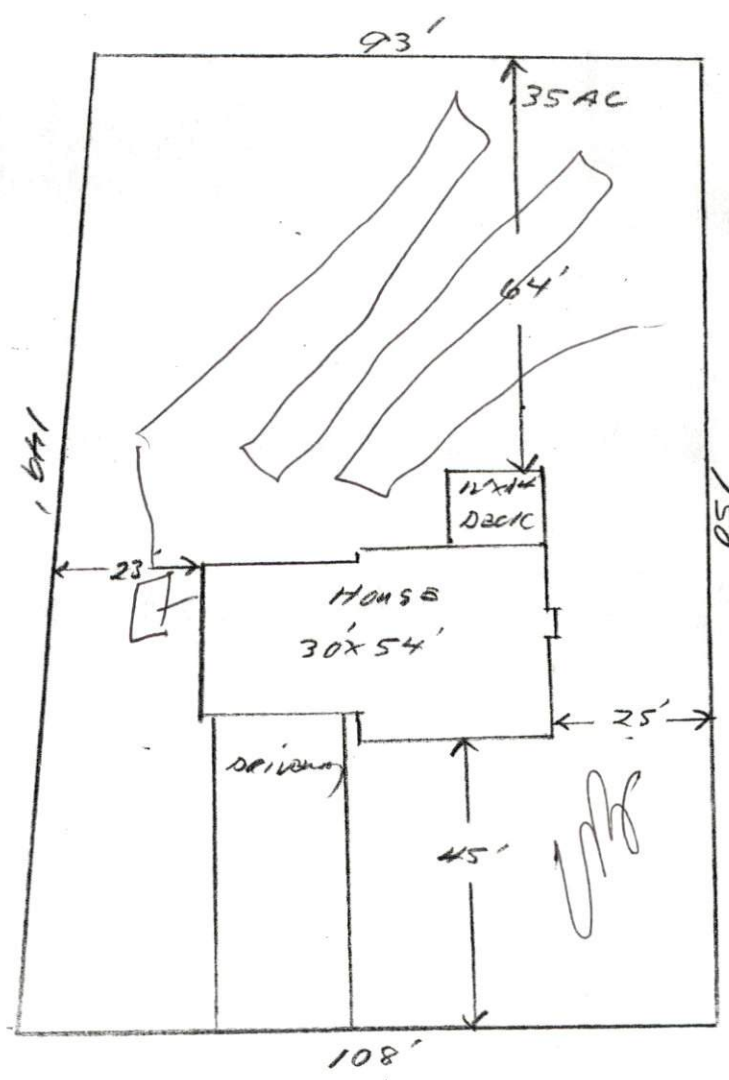
Wm Kent Peris
Signature of Applicant

6/28/02 Date #6337-10(S)

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

1" = 30'

D240
18-24



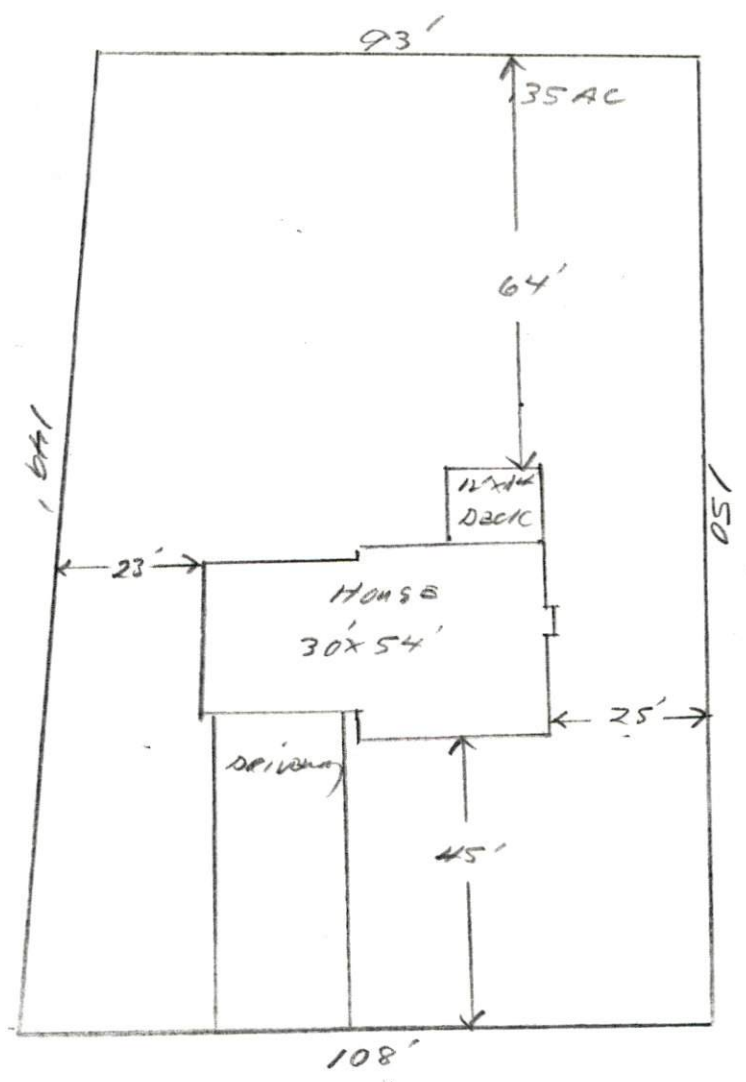
Odom Investments Inc.

Lot # 43 Crestview Estates

PLAN APPROVAL
 DISTRICT N/A USE SFD
 BEDROOMS 3
7-1-02 Johnson
 Zoning Administrator

	Required	Actual
Front	<u>35'</u>	<u>45'</u>
Side	<u>10'</u>	<u>23'</u>
Corner	<u>25'</u>	<u>44'</u>
Back	<u>10'</u>	<u>—</u>

1" = 30'



Odum Investments Inc.

Lot # 43 CARSTVIEW Estates

PLAN APPROVAL
 DISTRICT N/A USE SFD
 BEDROOMS 3
7-1-02 R. Johnson
 Zoning Administrator

Required Property Line Setbacks		
	Minimum	Actual
Front	<u>35'</u>	<u>45'</u>
Side	<u>10'</u>	<u>23'</u>
Corner	<u>25'</u>	<u>44'</u>
Rear	<u>10'</u>	<u>—</u>

HARNETT COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT

No 15845

As 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) Ted Brown New Installation Septic Tank
 Property Location: SR# off 1115 Repairs Nitrification Line

Subdivision Crestview Lot # 43
 Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: Three Lot Size: _____
 Basement with Plumbing: Garage:

Water Supply: Well Public Community
 Distance From Well: 50 ft.

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

Type of system: Conventional Other _____

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

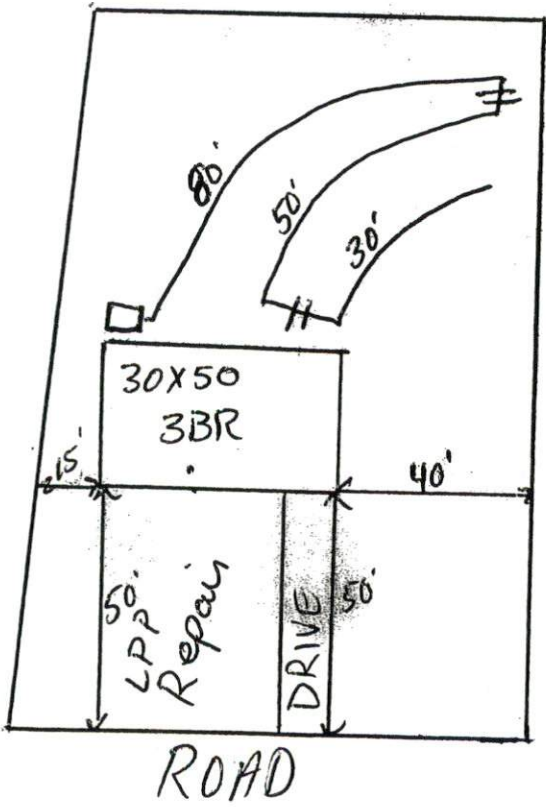
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 160 ft. width of ditches 3 ft. depth of ditches 18-30"

Trench Drain Required: _____ Linear feet

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

Date: 20 April 1998
 Signed: Vernest R. Dady
 Environmental Health Specialist

* maintain setbacks
 * Lines on contour
 * Filters & risers required



HARNETT COUNTY HEALTH DEP
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications by Harnett County Health Department Improvement Permit # 15845. 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 _____

Name: Ted Brown Telephone # 499-9435

Address: 2927 Hillmon Grove Rd. Cameron, NC

Property Location: SR # off 1115 Road Name off Puffalo Lake

New Installation Repair _____ Septic Tank Nitrification Lines

Subdivision Crestview Lot # 43

Number of Bedrooms Proposed: Three Lot size: _____

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 _____ gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 1 Length of lines 160 feet

Width of ditches 3 ft. Depth of ditches 18-30 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: Vernice N. Self Date: 28 April 1999

COUNTY OF HARNETT

Fee: 00

Receipt: _____

Permit 009859Date: 2.19.99

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:

NAME Ted Brown
ADDRESS 2927 K. G. Moore Court Rd
Cameron NC 28528
PHONE 4945445 W _____ H _____

APPLICANT INFORMATION:

NAME _____
ADDRESS _____
PHONE _____ W _____ H _____

PROPERTY LOCATION:

Street Address Assigned 25 Cliffside Ct
SR # 115 RD. NAME Buttalo Lake TOWNSHIP 03 FIRE _____ RESCUE _____
TAX MAP NO. 9587 S1 PARCEL NO. 3708 FLOOD PLAIN X PANEL 75
SUBDIVISION Crestview LOT # 47 LOT/TRACT SIZE _____
ZONING DISTRICT NA DEED BOOK 1324 PAGE 283-284
WATSHED DIST. NA WATER DIST. _____ PLAT BOOK _____ PAGE 04 F.1e

Give Directions to the Property from Lillington: Hwy 27 To
Buttalo Lake Rd Crestview 1/2 miles on left

PROPOSED USE

- Sg Family Dwelling (Size 30 x 50) # of Bedrooms 3 Basement _____
Garage _____ Deck _____ (size 12 x 14)
 Multi-Family Dwelling No. Units _____ No. Bedrooms/unit _____
 Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____
Deck _____ (size _____ x _____)
 Number of persons per Household _____
 Business SqFt Retail Space _____ Type _____
 Industry SqFt. _____ Type _____
 Home Occupation No. Rooms/size _____ Use _____
 Accessory Bldg. Size _____ Use _____
 Addition to Existing Bldg. Size _____ Use _____
 Sign Size _____ Type _____ Location _____
 Other _____

Water Supply: County Well (No. dwellings _____) Other _____
Sewer: Septic Tank (Existing? no) County Other _____
Erosion & Sedimentation Control Plan Required? Yes _____ No
Are there any wells not on this lot but within 40 ft of the property line _____ (show on Site Plan).

***NOTE:** A Site Plan must be attached to this Application, drawn to scale on an 8.5 by 11 sheet, showing: existing and proposed buildings, garages, driveways, decks, accessory buildings, well, and any wells within 40 feet of your property line.

A recorded deed and recorded plat are also required.

Application 3 F.1e