



Joe

COUNTY OF HARNETT

BI \$20⁰⁰ Fee:
Receipt:
006725 Permit:

03-5-5450 (23-9) Date: _____

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:

NAME J. L. Brown Builders, Inc.
ADDRESS Lt. 8 Box 126
Dunn, NC 28334
PHONE 919-4423 W _____ H _____

APPLICANT INFORMATION:

NAME _____
ADDRESS _____
PHONE _____ W _____ H _____

PROPERTY LOCATION:

Street Address Assigned Michaelyn Drive

SR # 2045 RD. NAME Elliott Bridge Rd. TOWNSHIP 01 FIRE _____ RESCUE _____

TAX MAP NO. 0534-64 PARCEL NO. 4669 FLOOD PLAIN X PANEL 165

SUBDIVISION Turnwood Subdivision LOT # 5 LOT/TRACT SIZE .46 A

ZONING DISTRICT NA DEED BOOK On PAGE File

WATCHED DIST. NA WATER DIST. _____ PLAT BOOK F PAGE 720-0

Give Directions to the Property from Lillington: Take 210 S.
Take left on Elliott Bridge Rd. Property is on right, before
intersection of NC 210 & Shady Grove Rd.

PROPOSED USE

- Single Family Dwelling (Size 56 x 26) # of Bedrooms 3 Basement No
Garage Yes Deck No (size _____ x _____)
- Multi-Family Dwelling No. Units _____ No. Bedrooms/unit _____
- Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____
Deck _____ (size _____ x _____)
- Number of persons per Household 4
- 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 no (show on Site Plan).

#743 9/5 S

*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, and any other structures within 40 feet of your property line.

0534-65-3001

SETBACK REQUIREMENTS

Front property line
Side property line
Corner side line
Rear Property Line
Nearest building
Stream
Percent Coverage

Actual

35
20

134

Minimum/Maximum Require

35
10
15
25
10

Are there any other structures on this tract of land? No
No. of single family dwellings No. of manufactured homes
Other (specify & number)

Does the property owner of this tract of land own any land that contains a manufactured home within five hundred feet of the tract listed above? Yes No

I hereby CERTIFY that the information contained herein is true to the best of my knowledge; and by accepting this permit shall in every respect conform to the terms of this application and to the provisions of the Statutes and Ordinances regulating development in Harnett County. Any VIOLATION of the terms above stated immediately REVOKES this PERMIT. I further understand that this structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued. This permit expires six months from date issued.

A S Dow
Landowner's Signature
(Or Authorized Agent)

4-23-97
Date

FOR OFFICE USE ONLY

Copy of recorded final plat of subdivision on file? yes

Is the lot/tract specified above in compliance with the Harnett County Subdivision Ordinance?
Watershed Ordinance?
Mobile Home Park Ord?

ISSUED

DENIED

Comments:

Tom B
Zoning/Watershed Administrator

4-23-97
Date

**Harnett County
Planning, Inspections and Central Permitting Dept.**

102 East Front Street, P.O. Box 65

Lillington, NC 27546

(910) 893-2793 - fax

Planning Dept.
Permitting Dept.
(910) 893-7525

Inspections Dept.
(910) 893-7527

Central
(910) 893-4759

FAX COVER SHEET

To: Susan

Fax Number: _____

From: Cindy

Date: _____

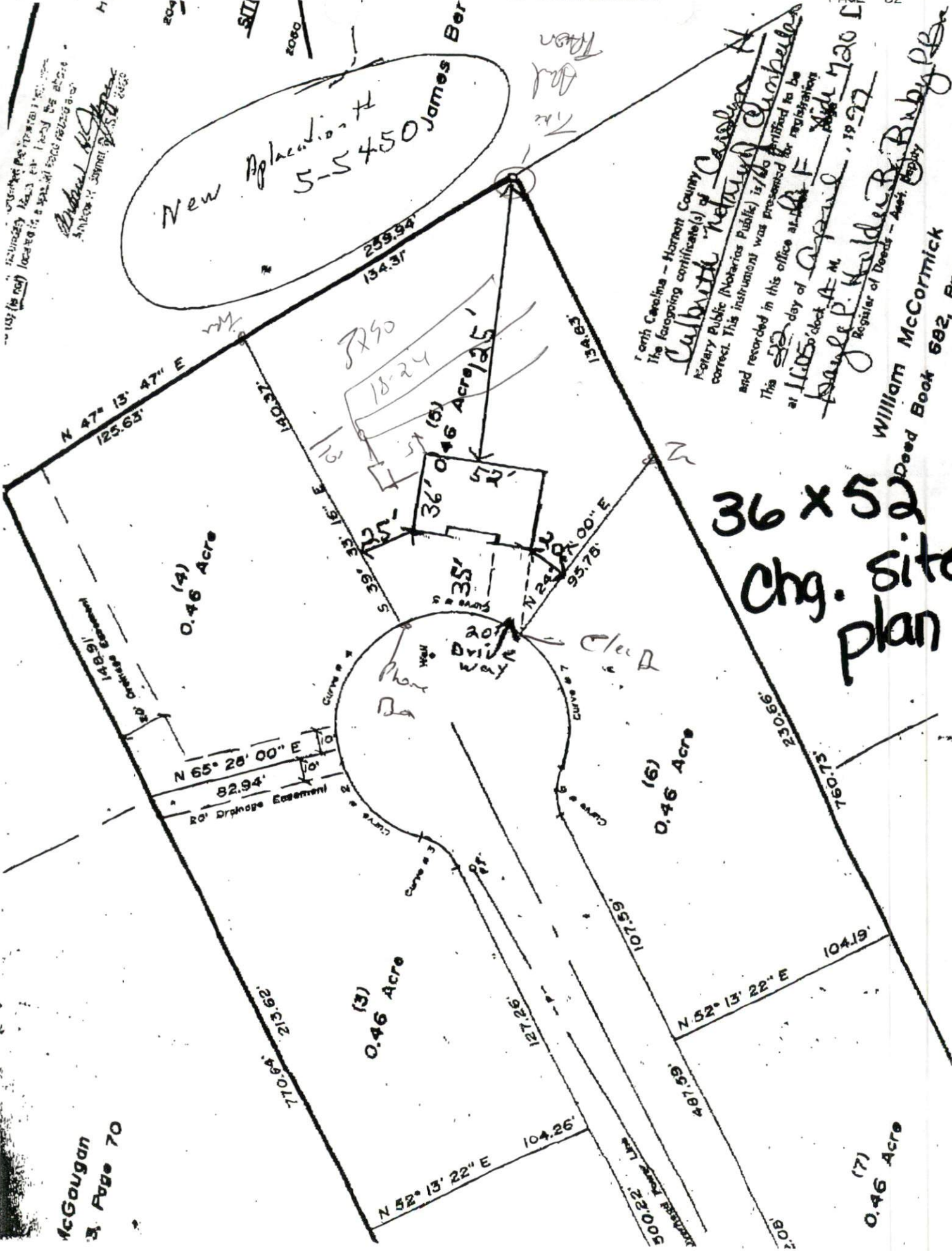
Number of Pages (including this one): _____

Comments:

Please add this new site
plan to app # 5450

Thanks,

Cindy



New Application #
5-5450 James Ber

North Carolina - Harnett County
The foregoing certificate(s) of
Notary Public (Notarios Public) is/are certified to be
correct. This instrument was presented for registration
and recorded in this office at 11:05 day of April, 1997
at Hickory North Carolina.
Walter P. Holder Registrar of Deeds - Harnett County
William McCormick Deed Book 682, Page 682

36 x 52
Chg. site
plan

McGaugan
Page 70

Order of the Harnett County
Notary Public (Notarios Public) is/are certified to be
correct. This instrument was presented for registration
and recorded in this office at 11:05 day of April, 1997
at Hickory North Carolina.
Walter P. Holder Registrar of Deeds - Harnett County

1821
E x 50

55'

52
42-48

52
~~52~~ 0
52

HARNETT COUNTY HEALTH DEPARTMENT IMPROVEMENT PERMIT

No 12425

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) JL Brown Builders New Installation Septic Tank
 Property Location: SR# 2045 Repairs Nitrification Line

Subdivision Turnwood Lot # 5

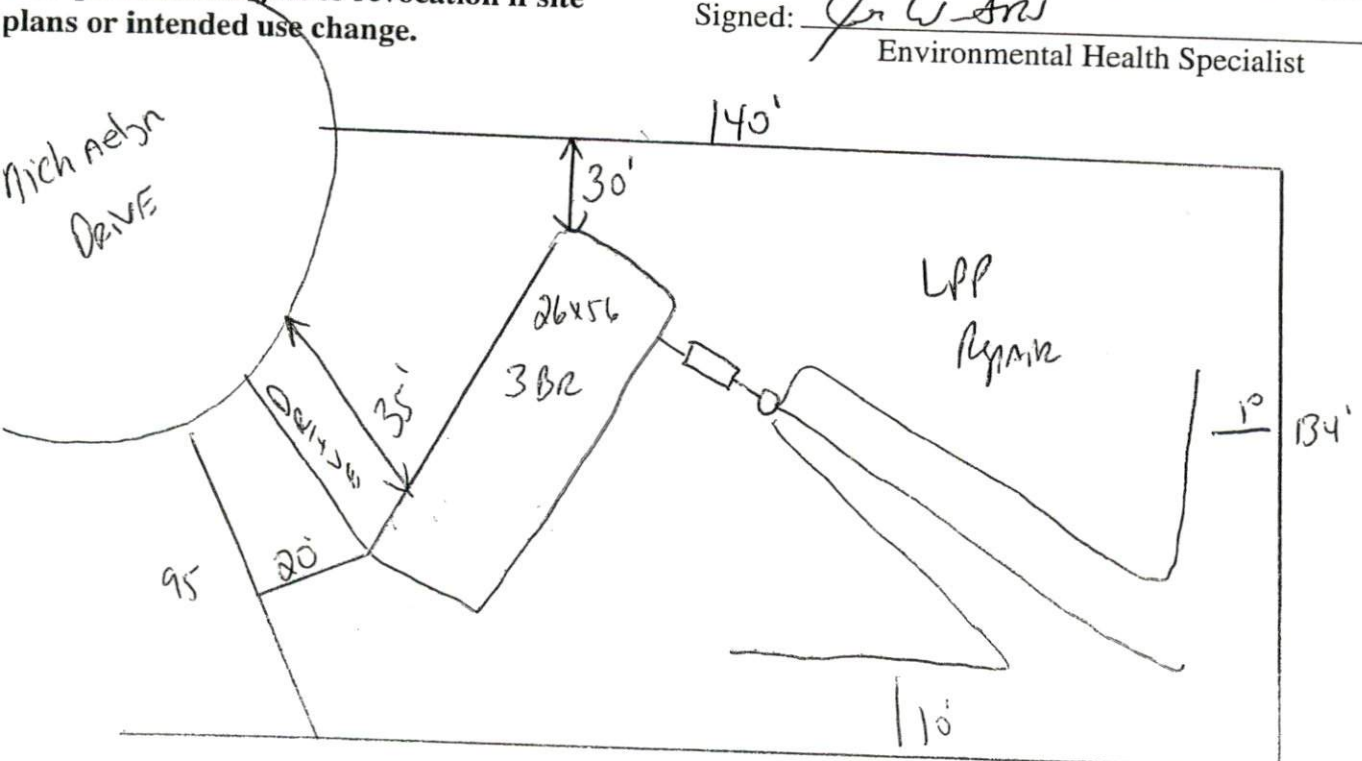
Tax ID # _____ Quadrant # _____
 Number of Bedrooms Proposed: 3 Lot Size: .46 AC

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 50 min 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 No. of exact length width of depth of
 Drainage Field ditches 3 of each ditch 90 ft. ditches 3 ft. ditches 18-24 in.
 French Drain Required: _____ Linear feet

This permit is subject to revocation if site plans or intended use change.
 Date: 5-7-97
 Signed: J. W. ...
 Environmental Health Specialist



STUB out Plumbing shallow
 8-24" Ditch Depth Follow contour
 installation at ...

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 # 12425. 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 JL Brown Builders

Name: _____ Telephone # _____

Address: _____

Property Location: SR# 2045 Road Name _____

New Installation Repair _____ Septic Tank Nitrification Lines

Subdivision TURNWOOD Lot # 5

Number of Bedrooms Proposed: 3 Lot size: 0.46 AC

Basement _____ With Plumbing _____ Without Plumbing _____

Water Supply: Well _____ Public Minimum Well Setback: 50' 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 3 Length of lines 90

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: [Signature] Date: 5-7-97