

Initial Application Date: 2/06/03

7000 sq. ft.
Oliver

Application # 03 20006442R

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: BALLARD WOODS LLC Mailing Address: PO BOX 6127
City: RALEIGH State: NC Zip: 27628 Phone #: 919-215-9861

APPLICANT: MICHAEL SHRIEVES Mailing Address: 844 CILLE DR.
City: ANGIER State: NC Zip: 27501 Phone #: 919-388-0384

PROPERTY LOCATION: SR #: 1437 SR Name: JOSEPH ALEXANDER DR/off Ballard Rd

Parcel: 08-0654-0292-30 PIN: 0652-20-1572

Zoning: RA30 Subdivision: BALLARD RD. Lot #: 101 Lot Size: 58

Flood Plain: X Panel: 50 Watershed: IV Deed Book/Page: 1691/945 Plat Book/Page: offer to purchase

If located with a Watershed indicate the % of Impervious Surface:
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 40th RT ON BALLARD RD.
RT ON JOSEPH ALEXANDER LOT ON RT.

PROPOSED USE:

- Sg. Family Dwelling (Size 25 x 55) # of Bedrooms 3 # Baths 2.5 Basement (w/wo bath) _____ Garage 20x20 Deck 12x12
Included
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size _____ x _____) # of Bedrooms _____ Garage _____ Deck _____
- Comments: _____
- 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: 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 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

Required Property Line Setbacks:	Minimum	Actual	Minimum	Actual
Front	<u>25</u>	<u>40</u> <u>35</u>	Rear	<u>25</u> <u>160</u>
Side	<u>10</u>	<u>18</u> <u>10</u>	Corner	<u>—</u> <u>—</u>
Nearest Building	<u>—</u>	<u>—</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.

Michael Shrieves
Signature of Owner or Owner's Agent

6 Feb 03
Date

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

519 8/21 N

Initial Application Date: 2/06/03

2000 sq. ft.

Application # 03-50006442

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Central Permitting

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City: ANGIER State: NC Zip: 27501 Phone #: 919-388-0384

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[Signature]
Signature of Owner or Owner's Agent

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115 2/7 N

SITE PLAN APPROVAL

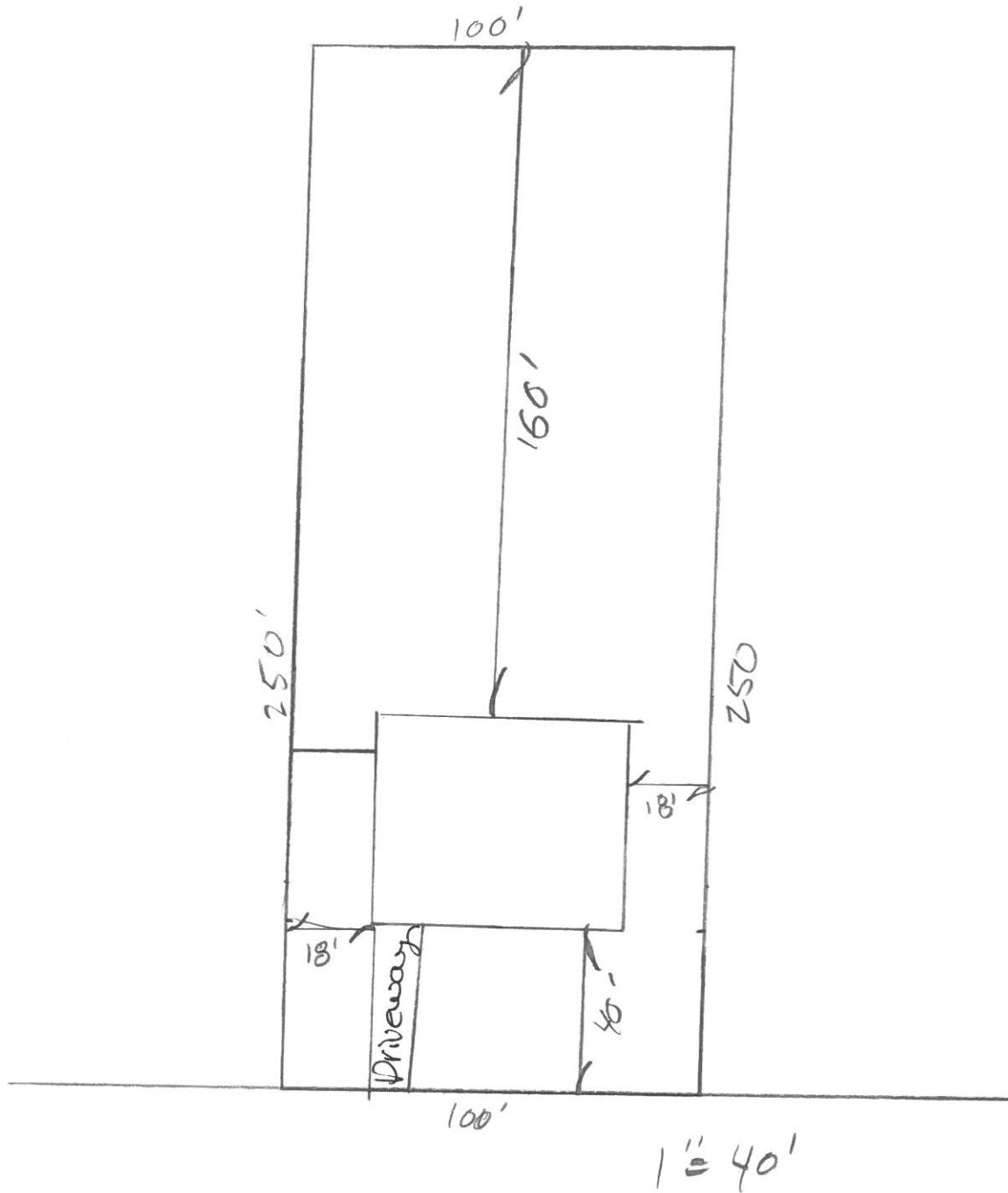
DISTRICT RA30 USE SFD

#BEDROOMS 3

2-8-03 Op. Williams
Date Zoning Administrator

Scale 1" = 40'

Lot# 101



LOT 101

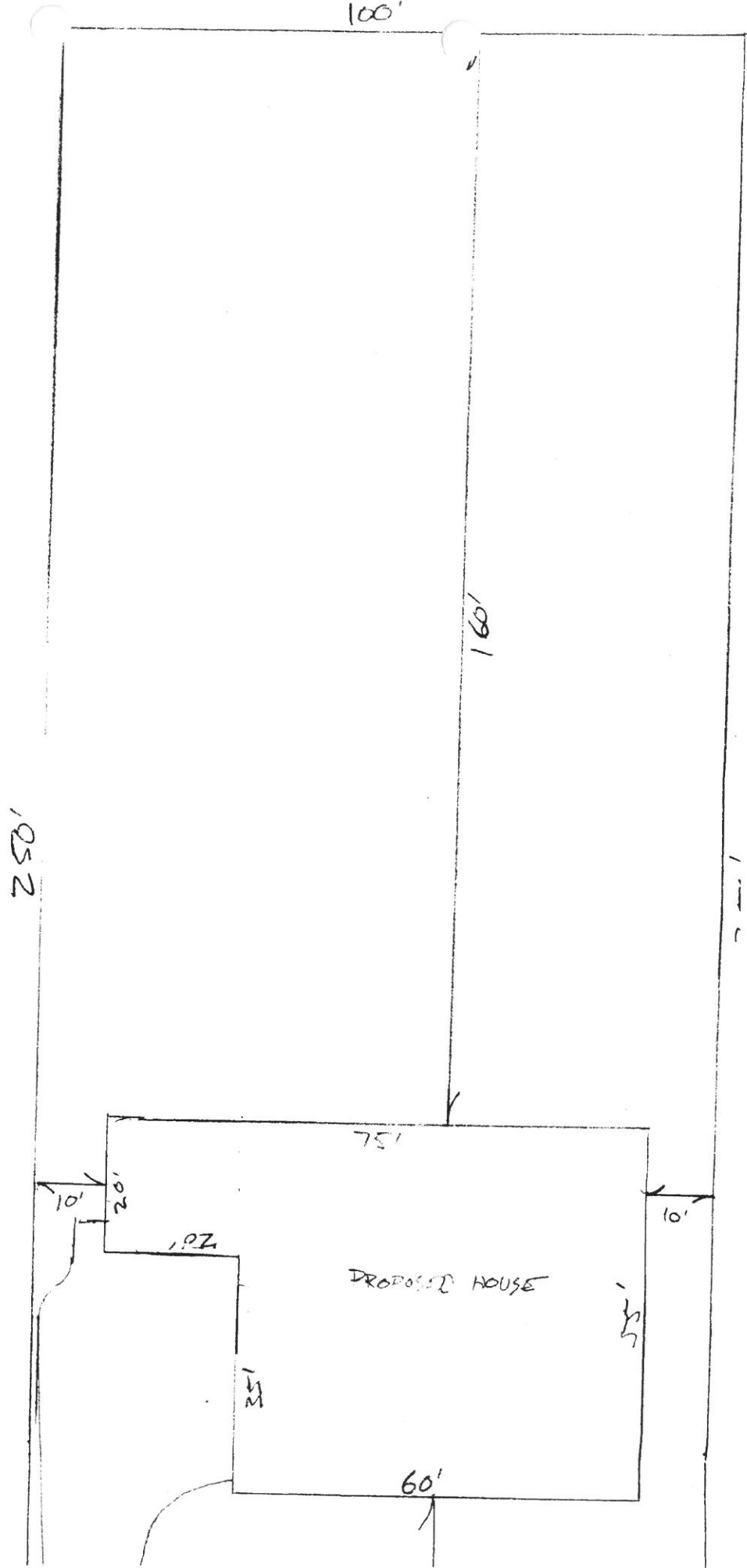
SITE PLAN APPROVAL

DISTRICT RA30 USE SFDR

#BEDROOMS 3

8-1903

[Signature]
Zoning Administrator



SITE PLAN APPROVAL

DISTRICT RA30 USE SFD

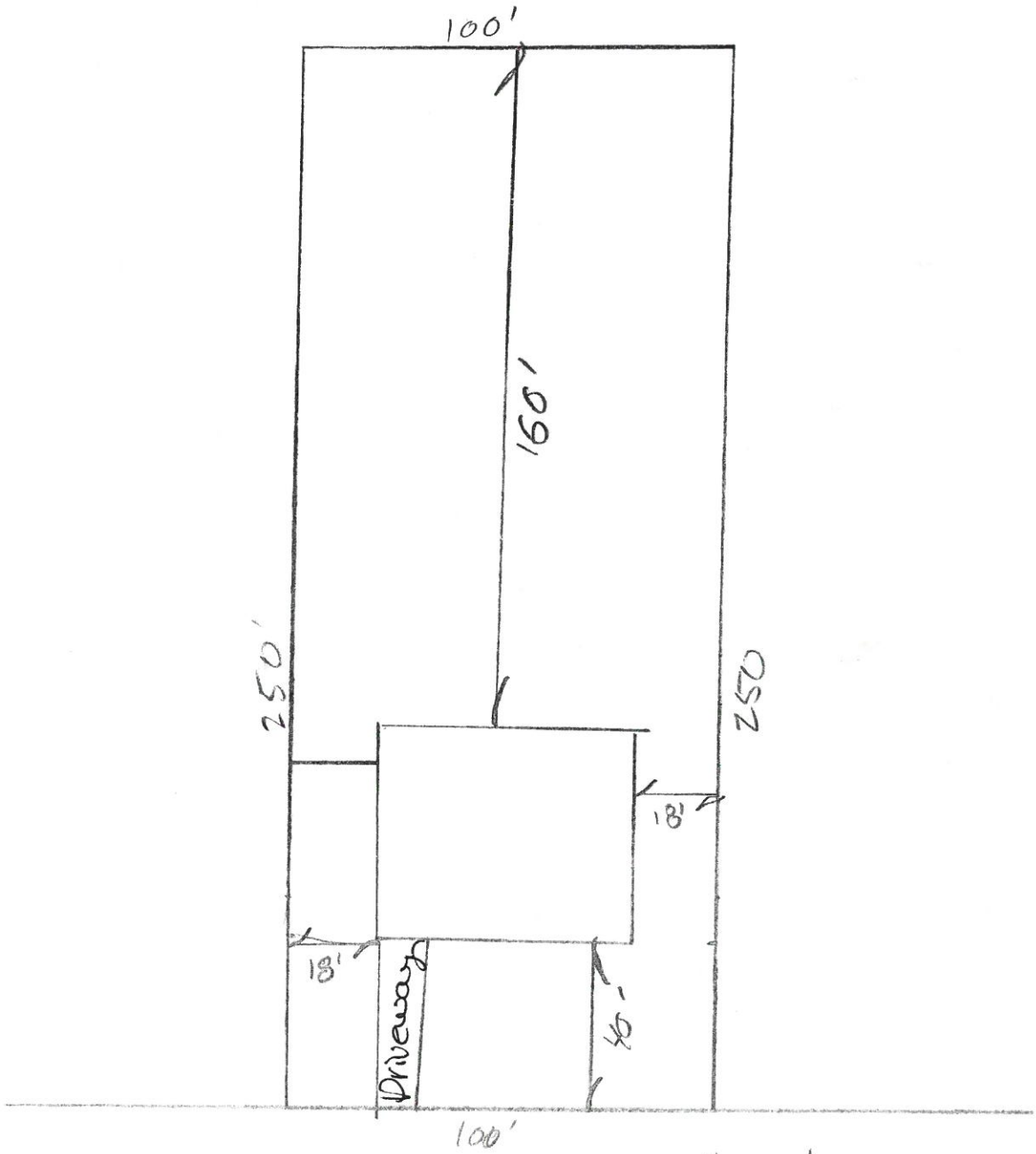
#BEDROOMS 3

2-8-03
Date

Op Williams
Zoning Administrator

Scale 1" = 40'

Lot # 101



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LOT 101