Initial Application Date: 11-18-03   Application # 0050008258

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting   102 E. Front Street, Lillington, NC 27546   Phone: (910) 893-4759   Fax: (910) 893-2793

LANDOWNER: Holloway Const.   Mailing Address: 6906 S. Staff Rd
City: Fay   State: NC   Zip: 28306   Phone #: 237-2808

APPLICANT: Holloway Const   Mailing Address: Same
City: _____   State: _____   Zip: _____   Phone #: _____

PROPERTY LOCATION: SR #: 1120   SR Name: Overhills Rd.
Parcel: 01-0536-0111-58   PIN: 0514-75-2935.000
Zoning: RA20M   Subdivision: Sierra Villa   Lot #: 27   Lot Size: 100x150
Flood Plain: X   Panel: 155   Watershed: na   Deed Book/Page: 1427/859   Plat Book/Page: offer to purchase

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 to overhills Rd
Subdivision off overhills RC

PROPOSED USE:
☑ Sg. Family Dwelling (Size 56 x 41) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) na Garage 2car Deck yes
☐ Multi-Family Dwelling No. Units _____   No. Bedrooms/Unit _____
☐ Manufactured Home (Size ___ x ___) # of Bedrooms _____ Garage _____ Deck _____
Comments: _____
☒ Number of persons per household spec.
☐ Business   Sq. Ft. Retail Space _____   Type Note: 25.00 charge
☐ 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   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		Minimum	Actual
Front	35	35	Rear	25	50+
Side	10	15	Corner		
Nearest Building	—	—			

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.

_____   11/18/03
Signature of Owner or Owner's Agent   Date

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

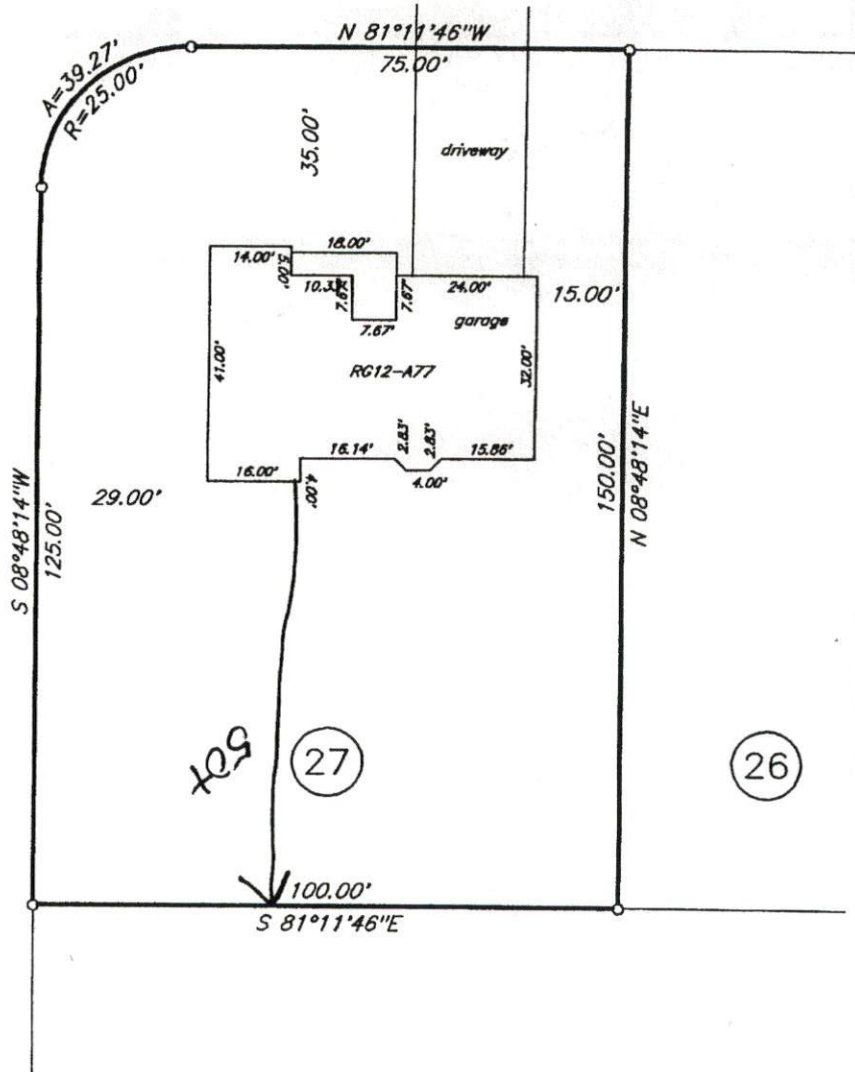A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE PERMIT

669 12/1   S

Montana Lane 60' R/W

Montana Lane 60' R/W

N 81°11'46"W
75.00'

A=39.27'
R=25.00'

35.00'

driveway

18.00'
14.00'
3.00'
10.34'
7.67'
7.67'
24.00'
15.00'
7.67'

garage

41.00'

RG12-A77

32.00'

S 08°48'14"W
125.00'

29.00'

16.14'
2.83'
2.83'
15.86'

16.00'
4.00'
4.00'

N 08°48'14"E
150.00'

50'

(27)

(26)

100.00'
S 81°11'46"E

Owner: Holloway Construction

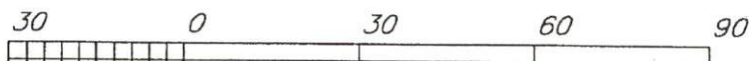Subdivision: Sierra Villa, Section Nine

Map Cab: F   Slide: 266-B

Harnett County   North Carolina

Scale 1" =   30' Date: 11/17/03 House No.

George L. Lott Surveyors
126 Rowland Circle Fayetteville N.C. 28301 488-8659

30   0   30   60   90

HARNETT COUNTY HEALTH DEPARTMENT   16677

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) _Price Construction_   ☒ New Installation   ☒ Septic Tank   ed

Property Location: SR# _1181 Sierra Villa_   ☐ Repairs   ☒ Nitrification Line   n

Subdivision _Sierra Villa_   Lot # _27_

Tax ID # _____   Quadrant # _____   3

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 _____

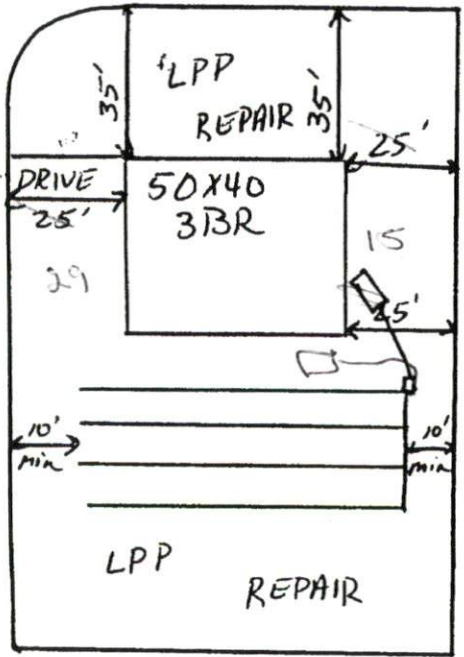Size of tank: Septic Tank: _1000_ gallons   Pump Tank: _____ gallons

Subsurface Drainage Field   No. of ditches _4_   exact length of each ditch _75_ ft.   width of ditches _3_ ft.   depth of ditches _18-24_ in.

French Drain Required: _____ Linear feet

Date: _07 Feb 2000_

Signed: _Vincent R. Dove_
Environmental Health Specialist

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

maintain setbacks

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 # _16677_. 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: _Priel Construction_   Telephone # _867-3753_

Address: _4501 Raeford Rd. Fay NC_

Property Location: SR # _1181_   Road Name _Siena Villa_

New Installation _X_ Repair _____ Septic Tank _X_ Nitrification Lines _X_

Subdivision _Siena Villa_   Lot # _27_

Number of Bedrooms Proposed: _Three_   Lot size: _____

Basement _____ With Plumbing _____ Without Plumbing _____

Water Supply: Well _____ Public _X_ Minimum Well Setback: _50_ ft.

Type of System: Conventional _X_ Other _____

Tank Volume: Septic Tank _1000_ gallons   Pump Chamber _____ gallons

Nitrification Field Specifications

Number of fields _1_   Number of Lines per Field _4_   Length of lines _75_

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: _Vincent R. Wolfe_   Date: _07 Feb 2000_

(Revised 2/96)CNSTRCT.WPD