

COUNTY OF HARNI [

Receipt:	_
Permit:	_

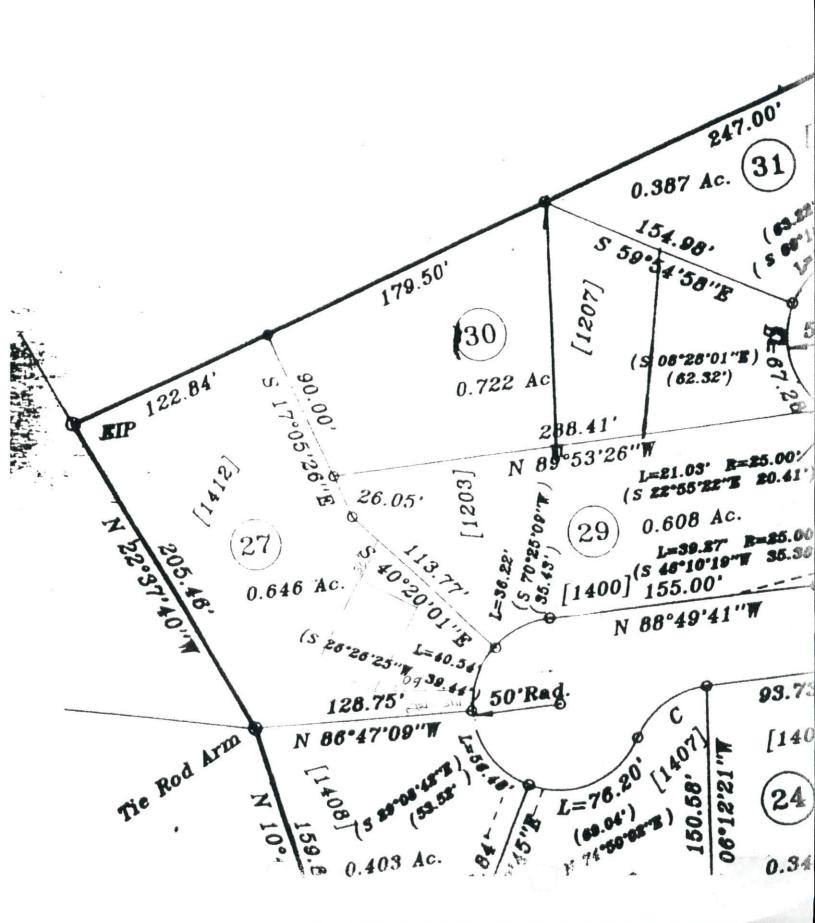
Date:		
DALL	8.	

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:	APPLICAMI IMPUNIMITUM:
NAME _ RAFTSMEN CongT Co	.
NAME TO THE COLON	NAME
	ADDRESS
PHONE 692-434W H	PHONEWH
PROPERTY LOCATION: Street Address Assigned	
SR # RD. NAME TOWN	SHIPFIRERESCUE
TAX MAP NO PARCEL NO	
SUBDIVISION STOCKTON	LOT # 27 LOT/TRACT SIZE 0.646 AC.
ZONING DISTRICT	DEED BOOKPAGE
WATSHED DIST WATER DIST	PLAT BOOKPAGE
Give Directions to the Property fro	m Lillington:
`	
PROPOSED (L) So Family Dwelling (Size 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2	# of Bedrooms Garage Type UseUseUse
Nater Supply: (_) County (_) Well Sewer: (_) Septic Tank (Existing?_Erosion & Sedimentation Control Plan Are there any wells not on this property line(show on Site Plan Must be attached to scale on an 8.5 by 11 she proposed buildings, garages, buildings, well, and any well property line.	Occupity (_) Other (_) Other (_) Required? Yes Nolot but within 40 ft of the (_) to this Application, drawn

SETBACK REQUIREMENTS Front property line Side property line Corner side line Rear Property Line Nearest building Stream	Actual 60 30	Minimum/Maximu	m Required
Percent Coverage			
Are there any other struc No. of single family dwel Other (specify & number)	lines / Ne		
Does the property owner contains a manufactured he listed above? Yes	of this tract	of 1	
I hereby CERTIFY that the the best of my knowledge; every respect conform to provisions of the Statute in Harnett County. Any immediately REVOKES this structure is not to be ocis issued. This permit exp	the terms of second second second ordinar violation of PERMIT. I	pting this permithis application application test regulating of the terms ab	it shall in and to the development ove stated stand this
Landowner's Signature (Or Authorized Agent)		Date	
*************	******	******	*******
· FOR OFFICE USE ONLY			
Copy of recorded final pla	t of subdivis	ion on file ?	
Is the lot/tract specified County Subdivision Ordinance Watershed Ordinance Mobile Home Park Ord	7	mpliance with t	he Harnett
ISSUED	DENIE	ED	
Comments:			
Zana ne dila transferi			
Zoning/Watershed Administra C:\WFZ\FORMS\PDLUPERM	tor	Date	



TOWN OF ANGIER, N. C.

APPLICATION FOR :	
() Improvement permit	(W Zoning of Property
() Mobile Home lot	() Subdivision Approval
() Conditional Use	() Mobile Home Park
() Parking permit	() Grading permit
() Satellite Dish Antenna	() Temporary permit
() Signs	() Special Use
() Fences	() Other
APPLICANT:	OWNER:
Name SAME AS ONNER	Name CRAFTSMAN CONSTRUCTION
Address	Address 10. 15 24
Phone	Phone $919 - 891 - 4345$
PRESENT USE OF PROPERTY SINGLE FAN	1:14 HOUSING SUBDIVISION
LOCATION OF PROPERTY Stock ton Subdi	VIXIN, ANGIER NC. Lot# 27
PROPOSED USE OF PROPERTY (Single Family Dwelling : # Rooms	# Bedrooms J Square feet <u>2400</u>
	s#Bedrooms (per unit)
square fee () Mobile Home (single lot): single	et (per unit)
() Mobile Home Park: Section 16, Zor	
() Business: total # of employees per Type of business	
() Others (specify)	
() Existing structure Reno	ovateAddition
Attach site plan showing property lin (including driveways, ratios, decks,	
WATER & SEWER SUPPLY: Private Public Proposed Existing	SEWER

APPLICANT: I certify that all of the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application.

Authorized Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

ZONING ADMINISTRATOR USE ONLY

or and

The above property is located in R-10		
zoning district and MAY be used as	1	
zoning district and MAY be used as		
NOTES:		
	J.	
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PERMIT # 2/697	hand hand	
ZONING ADMINISTRATOR Musley M. M. Lood		
DATE 1- COY		