



COUNTY OF HARNETT

Receipt: 006883
Permit: REF LUP

Date: 5-15-97

CONF# 663
5-15-97

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

6707

LANDOWNER INFORMATION:

APPLICANT INFORMATION:

NAME TERRI GIERI
ADDRESS 24/27 McKay Town Rd
Ameron NC 28326
PHONE 919 499-2424 W _____ H _____

NAME _____
ADDRESS _____
PHONE _____ W _____ H _____

PROPERTY LOCATION:

Street Address Assigned Forest Dr

SR # 24/27 RD. NAME 24/27 TOWNSHIP 09 FIRE _____ RESCUE _____

TAX MAP NO. 555 57 PARCEL NO. 3508 FLOOD PLAIN X PANEL 150

SUBDIVISION Sherwood Forest LOT # 26 LOT/TRACT SIZE _____

ZONING DISTRICT N/A DEED BOOK ON PAGE FILE

WATSHED DIST. JHP WATER DIST. _____ PLAT BOOK ON PAGE FILE

Give Directions to the Property from Lillington: 27 West to McKay Town Rd - at exit Forest Drive & up to lot # 26

PROPOSED USE

- Single Family Dwelling (Size ___ x ___) # of Bedrooms ___ Basement ___ Garage ___ Deck (size ___ x ___)
- Multi-Family Dwelling No. Units ___ No. Bedrooms/unit ___
- Manufactured Home (Size 28 x 64) # of Bedrooms 4 Garage ___ Deck (size 8 x 10)
- 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 X
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.

SETBACK REQUIREMENTS

Actual

Minimum/Maximum Required

Front property line	<u>20</u>	<u>35</u>
Side property line	<u>15</u>	<u>10</u>
Corner side line		<u>-</u>
Rear Property Line	<u>25</u>	<u>25</u>
Nearest building		<u>10</u>
Stream		
Percent Coverage		

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 X 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 this structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued. This permit expires six months from date issued.

Terris Core
 Landowner's Signature
 (Or Authorized Agent)

5/15/97
 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 _____

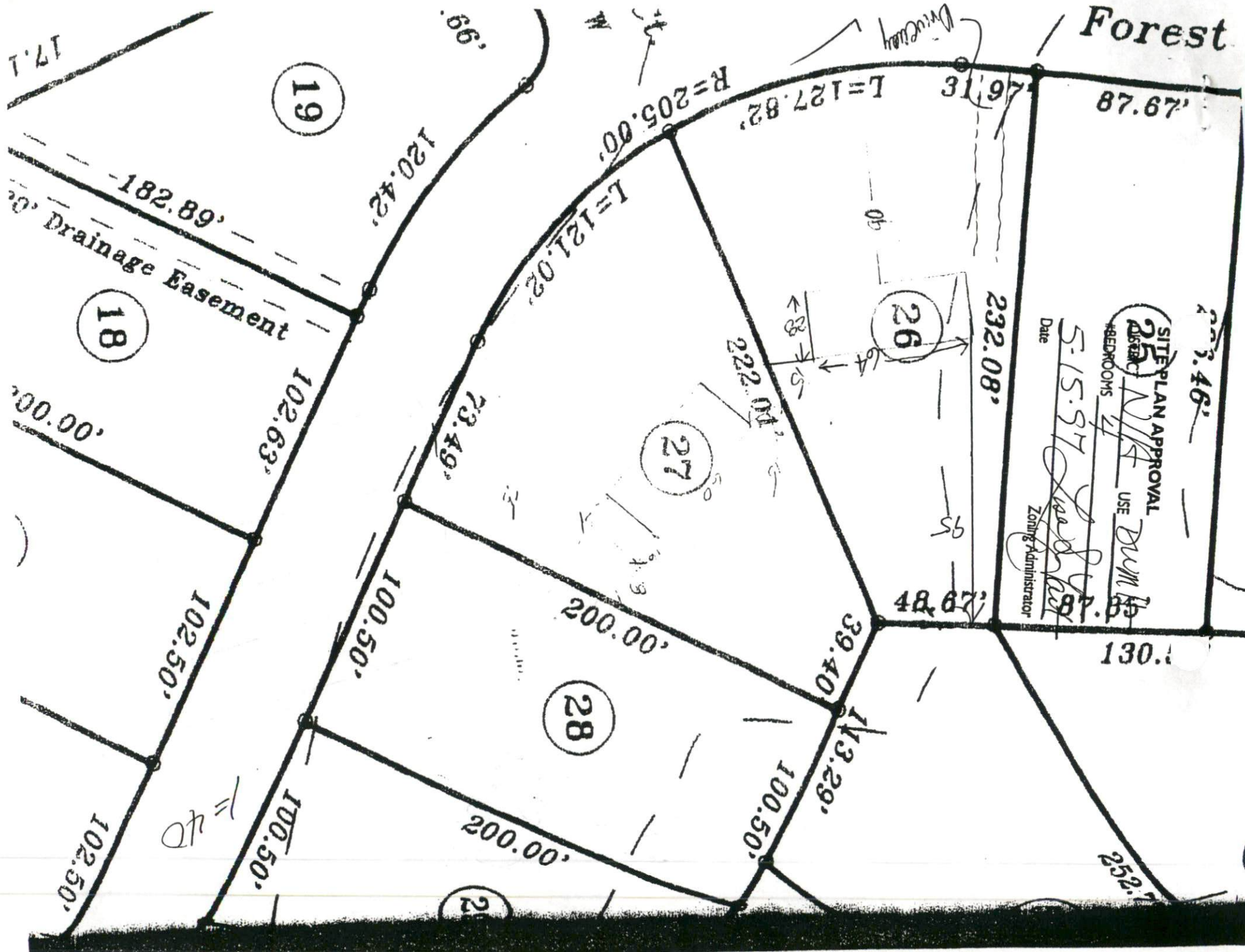
Comments: _____

Lisa D. Galt
 Zoning/Watershed Administrator

5.15.97
 Date

Forest

SITE PLAN APPROVAL
 DISTRICT 25 USE DWELLING
 BEDROOMS 4
 Date 5-15-97
 Zoning Administrator [Signature]



1x240
18.24
0.300
30.48 sec

