



Comp 7/3/96

Fee: 20

COUNTY OF HARNETT

lit

Receipt: _____

Permit: 005227

Date: 7-2-96

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:

NAME Thomas Franklin Williams JR
ADDRESS RT 3 Box 41B
Cameron NC 28326
PHONE 910 394 6744 W 919 499 0857 H

APPLICANT INFORMATION:

NAME _____
ADDRESS _____
PHONE _____ W _____ H _____

PROPERTY LOCATION:

Street Address Assigned Pine Oak Drive

SR # 1111 RD. NAME Marks RD TOWNSHIP 09 FIRE Dist 1 RESCUE Dist 13

TAX MAP NO. 9563-98 PARCEL NO. 2342 FLOOD PLAIN X PANEL 150

SUBDIVISION Sweet Briar estates LOT # 127 LOT/TRACT SIZE _____

ZONING DISTRICT N/A DEED BOOK 1156 PAGE 817

WATSHED DIST. WS III WATER DIST. _____ PLAT BOOK E PAGE 142-A *on file*

Give Directions to the Property from Lillington: Hwy 27 West To 87 South To 24 East 2mi Down on Left Take Marks rd 3.5mi on right

PROPOSED USE

- Sq Family Dwelling (Size ___ x ___) # of Bedrooms ___ Basement ___
Garage _____ Deck (size ___ x ___)
- Multi-Family Dwelling No. Units ___ No. Bedrooms/unit ___
- Manufactured Home (Size 24 x 56) # of Bedrooms 3 Garage none
Deck none (size ___ x ___)
- Number of persons per Household 3
- 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 1) 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).

***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.

Unrecorded deed and recorded plat are also required.

SETBACK REQUIREMENTS

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

Actual
100
27
80
NA
NA

Minimum/Maximum Required
35
10
20
25
10
-
-

Are there any other structures on this tract of land? NO
 No. of single family dwellings _____ No. of manufactured homes 1
 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 X

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.

Thomas Franklin Williams, Jr.
 Landowner's Signature
 (Or Authorized Agent)

2 July 96
 Date

FOR OFFICE USE ONLY

Copy of recorded final plat of subdivision on file? ✓
 Is the lot/tract specified above in compliance with the Harnett County Subdivision Ordinance? ✓
 Watershed Ordinance? ✓
 Mobile Home Park Ord? _____

ISSUED _____ DENIED _____

Comments: _____

Tom K
 Zoning/Watershed Administrator

7-2-96
 Date

July
2

Pump Repair

