## HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION APPLICATION FOR IMPROVEMENT PERMIT

1 1 1 1 -
DATE 19 14 9 2
NAME DAWNY NORKES TELEPHONE NO. 892-4345
ADDRESS (current) P.O. Box 1524 Dawn, N.C. 28335
PROPERTY OWNER HOME INVESTMENTS
SUBDIVISION NAME MERBEAUCH ESTATES LOT NO. 13
PROPERTY ADDRESS RIFE CAMERON STATE ROAD NO. HWY 27
DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES NO
IF NO EXPLAIN
DIRECTIONS TAKE 27W from Cillington Approx.
19 Mius To Subdivision on Right
SIZE OF LOT OR TRACT 3/4 ACRE +
1. Type of dwelling S.F.D. Basement with plumbing No. 2. Number of Bedrooms 3 Garage VES  3. Dishwasher YES  4. Garbage Disposal No.
WATER SUPPLY - PRIVATE WELLCOMMUNITY SYSTEMCOUNTY
A <u>plot plan</u> must be attached to this application showing: $\tilde{\mathbf{I}}$ ) Setting of dwelling, 2) Desired placement of septic tank system and 3) well placement.
Place stakes at the exact location of dwelling and at each corner of lot.
An on site inspection must be made, which consists of a soil evaluation.
A zoning permit must be obtained from the Planning Department before an improvement permit can be issued by this department.
This certifies that all the above information is correct to the best of my knowledge and any false information will result in the denial of permit. Once the permit is issued, the permit is good for a period of 5 years. The permit is subject to revocation if site plans or the intended use change.
$\left(\begin{array}{c} 1 \\ 1 \end{array}\right)$
Signature and and

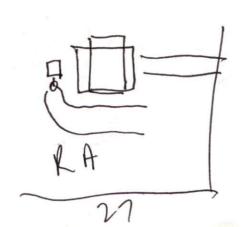
Revised (3-91)

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## SITE EVALUATION FORM

SPECIFY: S (suitable) P (provisionally) U (unsuitable)

FACTORS	AREA 1 _	AREA 2 _	AREA 3 _	AREA 4
TOPOGRAPHY	5		î î	
SOIL TEXTURE	5			
SOIL STRUCTURE	- 5			
SOIL DEPTH	1.5	a · ·		
RESTRICT HORIZON	3 - 1	and plants of the	- J.	
SOIL WETNESS	5			
OTHER				
SOIL GROUP	I	*		4
SITE CLASSIFICATION	- 5 -	_	-	
LIST RECOMMENDATIONS		AND ALTERNA	TIVES:	8
TIST RECOMMENDATIONS	, KIIIIAKKO , P			~
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DATE OF EVALUATION: (	-		111	



DASA (C 150'+

Hwy 27

20t# 13