

9-12-94

HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION  
APPLICATION FOR IMPROVEMENT PERMIT

Date 9-12-94

NAME CLAUDE R. ANDERSON TELEPHONE NO. 552-6995

MAILING ADDRESS (CURRENT) RT 2, Box 2851, FURQUAY NC. 27526

PROPERTY OWNER SHIRLEY SPENCE ANDERSON

SUBDIVISION NAME \_\_\_\_\_ LOT NO. \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ STATE RD. NO. 1419

DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES  NO \_\_\_\_\_

IF NO EXPLAIN \_\_\_\_\_

DIRECTIONS TAKE 40IN To SR1412 T/L Go THRU CHRISTIAN LIGHT AND BAPTIST GROVE T/L ON SR 1419 Go To 1ST BRICK House TAKE DIRT RD NEXT TO House FOLLOW ORANGE FLAGS TO SITE.  
SIZE OF LOT OR TRACT TRACT 4.92 ACRES

- 1. Type of dwelling SW MH Basement with plumbing \_\_\_\_\_
- 2. Number of Bedrooms 3 Garage \_\_\_\_\_
- 3. Dishwasher \_\_\_\_\_
- 4. Garbage Disposal \_\_\_\_\_

WATER SUPPLY - PRIVATE WELL \_\_\_\_\_ COMMUNITY SYSTEM \_\_\_\_\_ COUNTY

A Plot plan must be attached to this application showing: 1) Setting of dwelling, 2) Desired placement of septic tank system and 3) well placement.

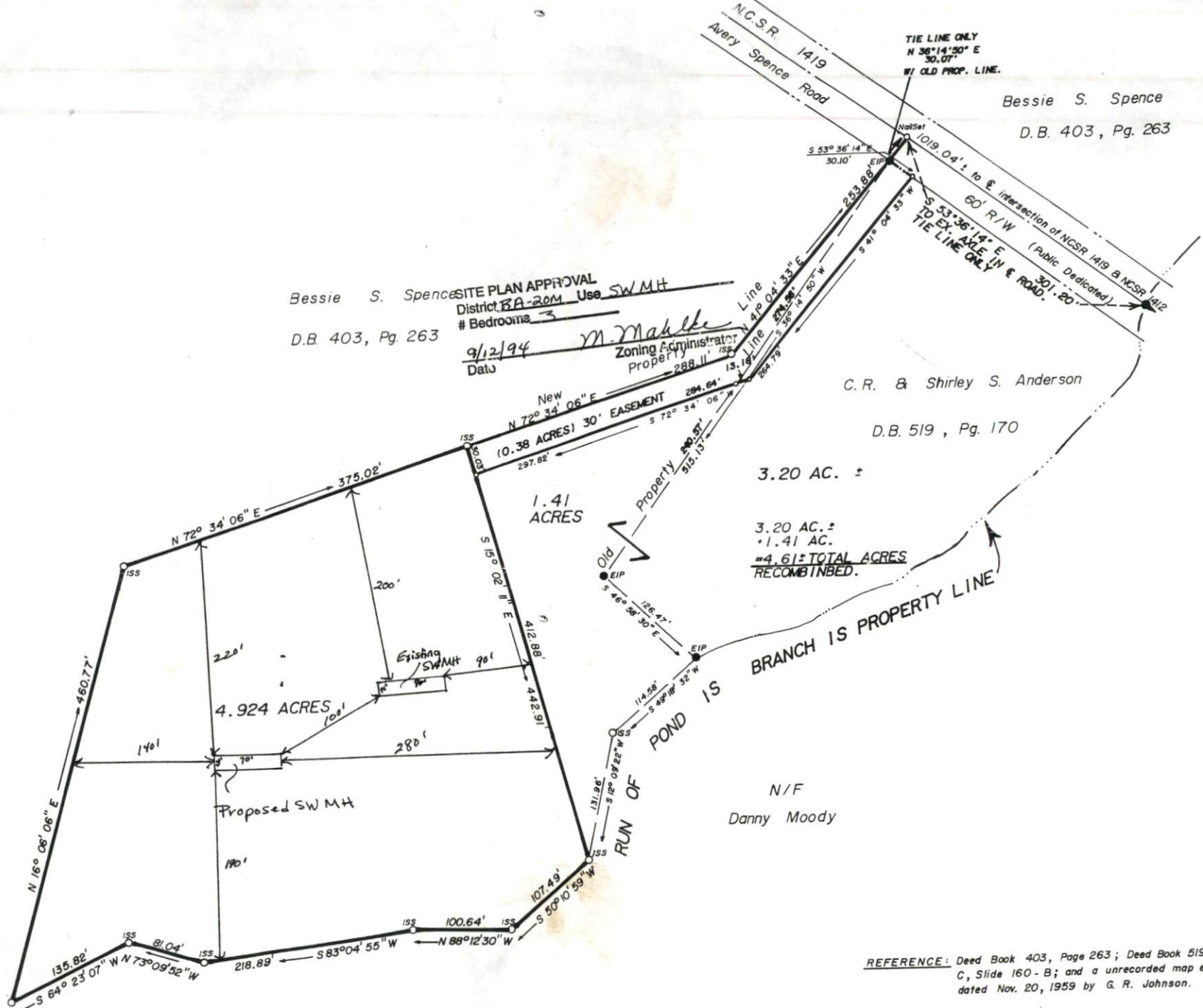
Place stakes at the exact location of dwelling and at each corner of lot.

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.

Signature Claude R. Anderson



Bessie S. Spence SITE PLAN APPROVAL  
 District BA-20M Use SWMH  
 # Bedrooms 3  
 9/12/94  
 Date

*M. Mahler*  
 Zoning Administrator  
 Property 288.11

Bessie S. Spence  
 D.B. 403, Pg. 263

C.R. & Shirley S. Anderson  
 D.B. 519, Pg. 170

3.20 AC. ±  
 3.20 AC. ±  
 + 1.41 AC.  
 = 4.61 ± TOTAL ACRES  
 RECOMBINED.

BRANCH IS PROPERTY LINE

N/F  
 Danny Moody

REFERENCE: Deed Book 403, Page 263; Deed Book 519, Page 170; Plat C, Slide 160-B; and a unrecorded map entitled "W. A. Spence" dated Nov. 20, 1959 by G. R. Johnson.

REVISIONS

PROPERTY OF

STANCIL & ASSOCIATES,



ENVI.

Improvement Permit

# County of Harnett

## DEPARTMENT OF PLANNING ZONING PERMIT

No 3170

Date September 12, 1994

Owner Shirley Spence Anderson

Address: Rt 2 Box 284 Fuquay Varina NC 27526

Zoning District: RA-20M

Use Classification: SW MH 3 bedrooms

Permit Number: 3170 SR 1419

*MEM*

Provided the person accepting this permit shall in every respect conform to the terms of the application on file in the Zoning Administrator's office 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.

NOTICE: This structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued by the Building Official.

PERMIT EXPIRES SIX MONTHS FROM DATE OF ISSUANCE.

**PLANNING DEPARTMENT**  
**893-7525**