

## **OUNTY OF HARNET**

EH

Receipt:

Date: 11-22-96

## APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

	PROPERTY DESCRIPTION/LAND USE PERMIT		
/	LANDOWNER INFORMATION:  APPLICANT INFORMATION:		
	NAME Betty Brinkly monilly NAME KASEN John ADDRESS R+5 Box 104 Ameron NC 28726 PHONE W 4927657H  PHONE 776-8366W 497-2011 H		
	Street Address Assigned  SR # # RD. NAME NC 87 TOWNSHIP 01 FIRE RESCUE		
	TAX MAP NO. 9594- 34 PARCEL NO. 8634 FLOOD PLAIN X PANEL 150		
	SUBDIVISION Betty Brinkley McMillizor #_ LOT/TRACT SIZE . 61 A		
	ZONING DISTRICT NA DEED BOOK 696 PAGE 561		
	WATSHED DIST. NA WATER DIST. PLAT BOOK F PAGE 657-B		
	We Directions to the Property from Lillington: Take NC 27 W. Tora left onto .87. Projectly is a very before ruching 5/1/1/7. Uga about 3 muss on the left.  2 differing down from Rochola Pape Sign on left		
PROPOSED USE			
	(_) Sg Family Dwelling(Sizex) # of Bedrooms Basement Garage Deck(sizex)		
	(_) Malti-Family Dwelling No. Units No. Bedrooms/unit		
	( Manufactured Home (Size 28 × 80 ) # of Bedrooms 3 Garage No		
	Deck No (size x_)		
	Number of persons per Household		
(	_) Accessory Bldg. Size Use		
(	_) Addition to Existing Bldg. SizeUse		
(	_) Sign Size Type Location		
(	_) Other		
h	later Supply: ( County (_) Well (No. dwellings) (_) Other		
5	rosion & Sedimentation Control Plan Required? Yes No		
1	re there any wells not on this lot but within 40 ft of the		
P	roperty line No (show on Site Plan).		
*	NOTE: A Site Plan must be attached to this Application, drawn		

A recorded deed and recorded plat are also required.

property line.

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

	SETBACK REQUIREMENTS Front property line Side property line Corner side line Rear Property Line Nearest building Stream Percent Coverage	Minimum/Maximum Required 35 /0 /5 25	
	Are there any other structures on this tract of land? NO. of single family dwellings No. of manufactured homesOther (specify & number)		
		s tract of land own any land that Whin five hundred feet of the tract	
	I hereby <u>CERTIFY</u> 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 <u>VIOLATION</u> of the terms above stated immediately <u>REVOKES</u> this <u>PERMIT</u> . I further understand this structure is not to be occupied until a <u>CERTIFICATE</u> OF OCCUPANCY is issued. This <u>permit expires</u> six months from date issued.		
	Landowner's Signature (Or Authorized Agent)	11-22-96 Date	
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ı	FOR OFFICE USE ONLY		
-	Copy of recorded final plat of s	subdivision on file ?	
	Is the lot/tract specified above County Subdivision Ordinance? Watershed Ordinance? Mobile Home Park Ord?	e in compliance with the Harnett	
1	ISSUED	DENIED	
Comments:			
-			
- Z	Zoning/Watershed Administrator	11-22-96 Date	

