HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION, PO BOX 09, LILLINGTON, NC 893-7547 APPLICATION FOR IMPROVEMENT PERMIT

DATE September 28, 1995

NAME KILARNOLD CORPORATION	TELEPHONE NO. 919-499-2552
ADDRESS(current) 5004 Independence	Way, Cameron, NC 28326
PROPERTY OWNER KILARNOLD CORPORATI	ON
SUBDIVISION NAME HERITAGE VILLAGE	LOT NOE68
PROPERTY ADDRESS	STATE RD. NO
DO YOU HAVE A LEGAL DEED TO THIS P PLEASE SHOW A PURCHASE AGREEMENT O IF NO EXPLAIN	R AUTHORIZATION OF AUTHORITY
DIRECTIONS <u>High way 24 past highwa</u> miles on left	y 87 West of intersection .7
SIZE OF LOT OR TRACT Lots 20,000 s	quare feet or better
1. Type of dwelling DW 2. Number of Bedrooms 3 3. Dishwasher YES 4. Garbage Disposal NO	
WATER SUPPLY - PRIVATE WELL CO	MMUNITY SYSTEM COUNTY_X
A <u>plot plan</u> must be attached to th 1) Setting of dwelling, 2) Desired and 3) Well placement.	is application showing: placement of septic tank system
Place stakes at the exact location of lot.	of dwelling and at each corner
An on site inspection must be mevaluation.	ade, which consists of a soil
A zoning permit must be obtained before an improvement permit can b	from the Planning Department e issued by this department.
This certifies that all the above best of my knowledge and any false denial of permit. Once the permit for a period of 5 years. The permit plans or the intended use characteristics.	information will result in the is issued, the permit is good it is subject to revocation if nge.
	KILARNOLD CORPORATION
Signature of Owner Revised (3-93) or Authorized Agent	

