



Cont # 658
11-9-98

LAND USE PERMIT

Harnett County Planning Department
102 E. Front Street, Lillington, NC 27546
Phone: (910) 893-7525 Fax: (910) 893-2793

EH

Fee 20⁰⁰

Receipt

Permit 009400

Date 11-5-98

LANDOWNER INFORMATION:

Name Stray Cat / Red Dog
Address P.O. Box 118
Sanford, N.C. 27331-0118
Phone H 919-774-8899 W

APPLICANT INFORMATION:

Name Walker, Angelia
Address 2201 First Ave
Elizabeth town, N.C. 28339
Phone 910-872-0070 H

P.O. Box
574
Cameron
NC
28326

PROPERTY LOCATION:

Street Address Assigned _____
SR # 15024/27 Rd. Name 275 NC 24/27 Township 09 Zoning District MA
PIN 3546 90 8356 splst PARCEL 09-9566-0141
Subdivision Last Valley Lot # 1 Lot/Tract Size 10.01
Flood Plain X Panel 150 Deed Book offer 2 Page parchs
Watershed District III Plat Book ON Page FILE

Ⓢ side app. ≈ 40 ft

Give Directions to the Property from Lillington: Take 27 to 24-27, take
right to Lizzie Teeter Rd turn Left go
down 5/10 of a mile.

PROPOSED USE:

- Sg. Family Dwelling (Size _____ x _____) # of Bedrooms _____ Basement _____ Garage _____
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size 12x60) # of Bedrooms 2 Garage _____ Deck _____
- Number of persons per household _____
- Business Sq. Ft. Retail Space _____ Type _____
- Industry Sq. Ft. _____ Type _____
- Home Occupation No. Rooms/Size _____ Use _____
- Accessory Building Size _____ Use _____
- Addition to Existing Building Size _____ Use _____
- Sign Size _____ Type _____ Use _____
- Other _____ Location _____

Water Supply: County Well (No. dwellings _____) Other
Sewer: Septic Tank (Existing? NO) County Other
Erosion & Sedimentation Control Plan Required? Yes _____ No

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, wells, and any wells within 40 feet of your property line.

LAND USE PERMIT IS REQUIRED WHEN PICKING UP SEPTIC, BUILDING AND SET-UP PERMITS

SETBACK REQUIREMENTS

ACTUAL

MINIMUM/MINIMUM REQUIRED

Front Property Line
Side Property Line
Corner Side Line
Rear Property Line
Nearest Building
Stream
Percent Coverage

40
40
100

35
10
15
25
10

Are there any other structures on this tract of land? NO
No. of single family dwellings _____ No. of manufactured homes _____ Other (specify) _____

Does the property owner of this tract of land own any land that contains a manufactured home within five hundred feet (500') 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.

[Signature]
Landowner's Signature
(Or Authorized Agent)

[Signature] 11-5-98
Date

THIS PERMIT EXPIRES 6 MONTHS FROM THE DATE ISSUED IF NO WORK HAS BEGUN BEFORE THAT DATE.

FOR OFFICE USE ONLY

Copy of recorded final plat of subdivision on file? YES

Is the lot/tract specified above in compliance with the Harnett County

Subdivision Ordinance _____
Watershed Ordinance _____
Manufactured Home Park Ordinance _____

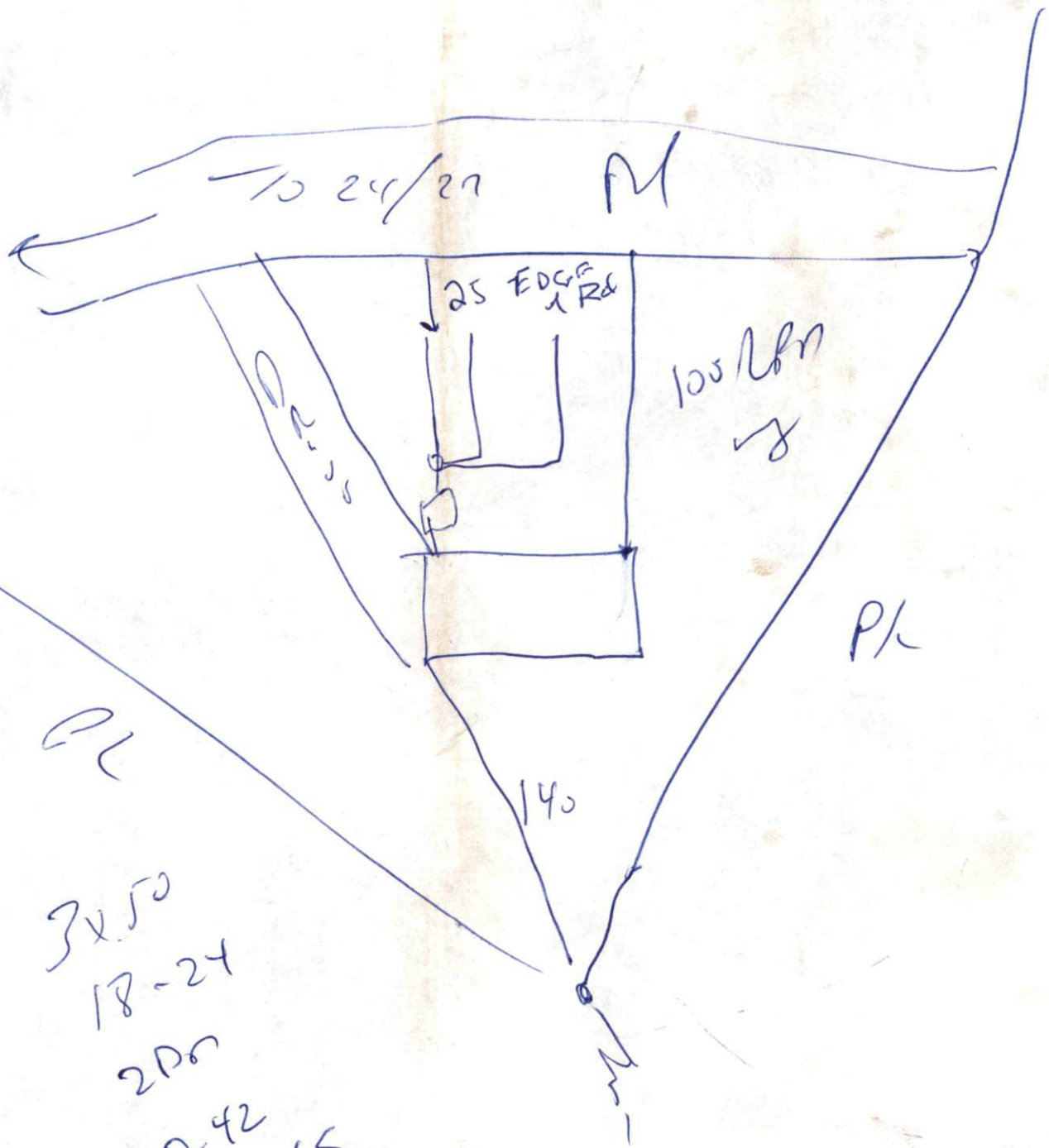
ISSUED _____

DENIED _____

Comments:

[Signature]
Zoning/Watershed Administrator

11-5-98
Date



3x.50
 18-24
 200
 0.42
~~LS~~ LS