

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION
APPLICATION FOR IMPROVEMENT PERMIT

Danny Norris Date *Dec 1 1994*
NAME *CUMBERLAND HOMES INC.* TELEPHONE NO. *992-4345*
MAILING ADDRESS (CURRENT) *P.O. Box 1524 Dunn N.C. 28334*
PROPERTY OWNER *Danny Norris*
SUBDIVISION NAME *Bridlewood SUBDIVISION* LOT NO. *43*
PROPERTY ADDRESS *OAKWATER DR.* STATE RD. NO. _____
DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES NO. _____
IF NO EXPLAIN _____

DIRECTIONS *From Lillington Take N.C. 27 W, To N.C. 24,*
Turn left on N.C. 24 go about 1/2 mile Bridlewood, on Right
SIZE OF LOT OR TRACT *150 FT X 150 FT*

- 1. Type of dwelling *S.F.D.* 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.

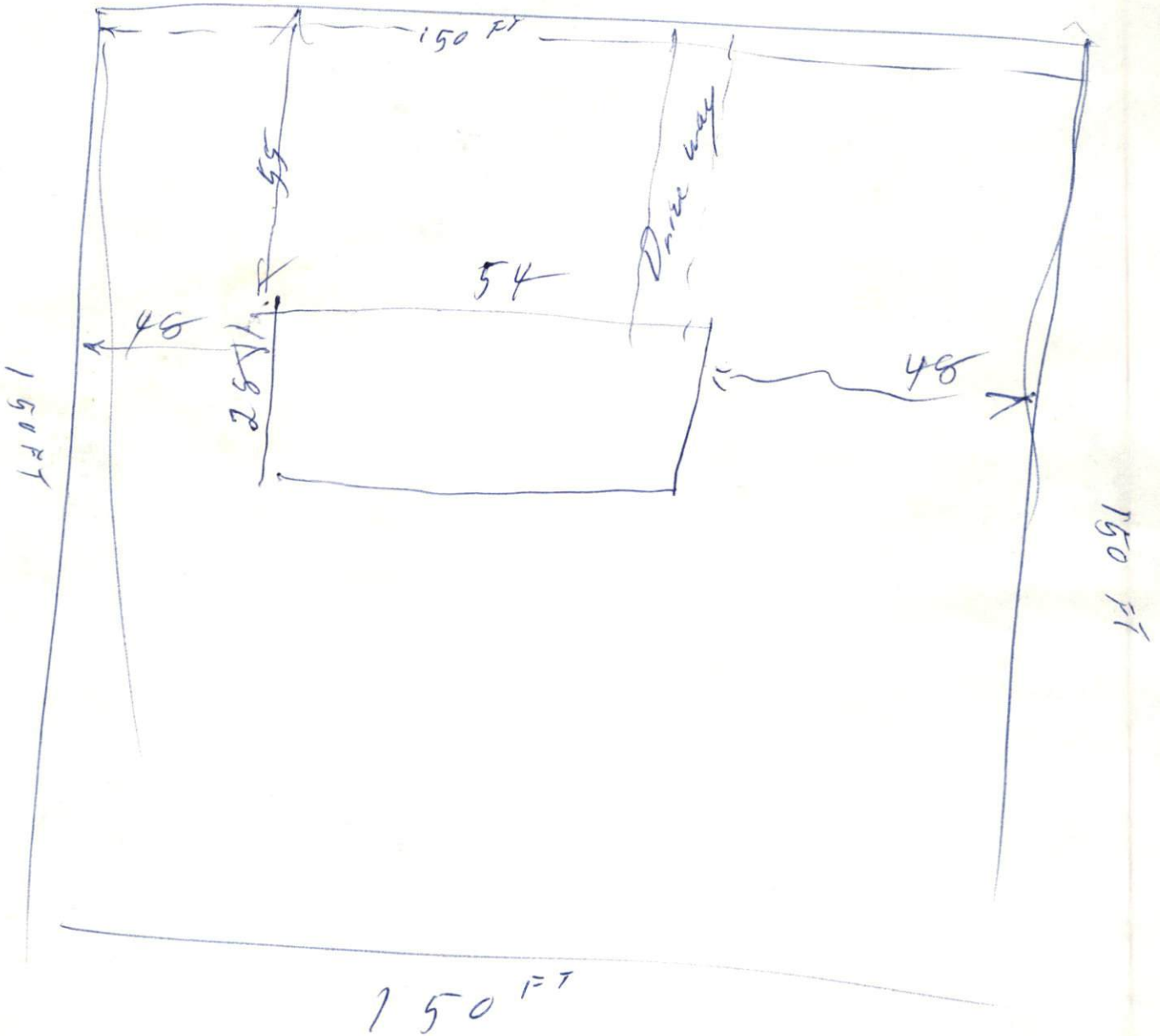
This certifies that all the above information is correct to the best of my knowledge and any false information will result in the denial of permit. Once the permit is issued, the permit is good for a period of 5 years. The permit is subject to revocation if site plans or the intended use change.

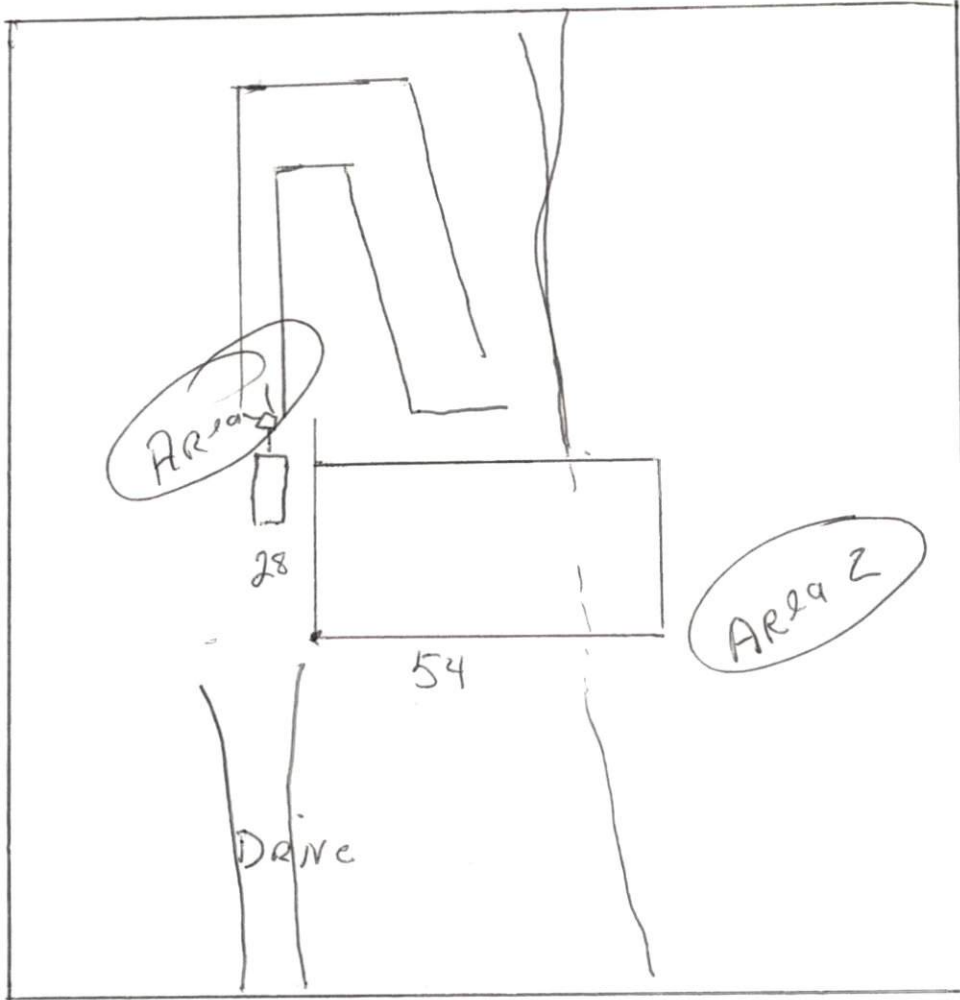
Signature *Danny Norris* _____

Danny NORRIS
CUMBERLAND
892-4345 HOMES INC.
DANN

LOT # 43
BRIDLEWOOD SUBDIVISION
JOHNSONVILLE TWP.
OFF # 24

OAK WATER DR.





OAK WATER DR

SCALE
1" = 30'