*** *** ***	TT COUNTY HEALTH DEPARTMENT	
307 CORNELII	PONMENTAL HEALTH SECTION LARNETT BLVD. LILLLINGTON,	27546
I	APPLICATION FOR REPAIR	

	DATE /-/4-00
NAME Blondell BALLEW	
ADDRESS 2208 Angier Rd	
PROPERTY OWNER 3ame	
SUBDIVISION NAME Graham HOWARD	LOT NO
STATE ROAD NAME 2770 - ATKINS	RO STATE RD. NO. 2770
SIZE OF LOT OR TRACT 1.32 ACTES	
DIRECTIONS	
TYPE OF DWELLING Stick Built BANUMBER OF BEDROOMS 3 GADISHWASHER 1/85 GA	SEMENT WITH PLUMBING
DISHWASHER // S GA	RBAGE DISPOSAL 1/4.5
WATER SUPPLY: PRIVATE WELL COMMUNITY	SYSTEM COUNTY
INSTRUCTIO	
 A surveyed and recorded map and deed must be attached Location of dwelling 2) Location of driveway 3) Location 	ed to this application along with a site plan showing: cation of any wells and other existing structures.
 The outlet end of the tank and distribution box will need to tank is uncovered and property lines are marked, you will let us know that it is ready. 	o be uncovered and property lines marked. After the need to call our office at 893-7547 or 893-7548 and
 The system must be repaired in the set time of the violation needs to be repaired within 30 days. 	on letter or if there is no violation letter, then the tank

Signature of Owner or Authorized Agent ONLY Pan Dickern

Insta	aller of System T & H	
Sept	tic Tank Installer 7.9 / H	
Des	igner of System	
1.	Number of people who live in the house 2	
	How many adults How many children	
2.	What is your average daily water usage?	
3.	Do you have a garbage disposal?	
	How often do you use it?	
4.	When was the septic tank last pumped?	
	How often do you have it pumped?	
5.	Do you have a dishwashing machine?	
	How often do you use it?	
6.	Do you have a clothes washing machine?	
	How often do you use it?	
7.	Do you have a water softener or water treatment system?	
	Where does it drain?	
8.	Do you use an "in the tank" toilet bowl sanitizer?	
9.	Is any family member using a (long term) prescription drug, antibiotics or chemotherapy?	
	What kinds?	
10.	Are any chemicals (paints, thinners, etc.) disposed of down the drain?	
	What kinds?	
11.	Have any new water using fixtures been added since the system was installed?	
	What kinds?	111

o you have any u	nderground lawn-w	ratering system?	NO		
las any site work asement/foundation	been done to the ho on drains, landscap	ouse since you ming, etc.?/	noved in, such a	as underground roof gu	ter drain,
What kinds	?				
re there any under	rground utilities on	your lot?		-	
Power	Phone	Cable	Gas	Water	
escribe what happ	ens when you have	e a problem with	your septic tar	nk system.	
Describe what happ	ens when you have	e a problem with	your septic tar	nk system.	
When did you first	notice the problem	1?			
When did you first	notice the problem	1?			

CC.... Y OF HARNETT LAND USE APPLICATION

City: FUGUAL VACIONA State: NC Zip: 2750) Phone # (9/9) (39-4429) PAPPLICANT: SCATTLE CAPITAL BUILD Address: 208 ANGJEY Rd City: FUGUAL VACIONA State: NC Zip: 2750) Phone # (9/9) (39-4429) PAPPLICANT: SCATTLE CAPITAL BUILD Redidress: 428 Six Folks Rd City: Paleign State: NC Zip: 276 Of Phone #: 9/9 5.71-7966 PROPERTY LOCATION: SR #: 1448 SR Name: Atkins Road Parcel: 04-065-024-06 PIN: 0665-61-1752 Zoning: RA-30 Subdivision: Rudy Howard Lot #: 4 Lot Size: 1.32 AC Flood Plain: Panel: 50 Watershed: No Deed Book/Page: 0936/0907 Plat Book/Page: 204 Map PROPOSED USE: () Sg. Family Dwelling (Size x # of Bedrooms Basement Garage Deck () Multi-Family Dwelling (Size x # of Bedrooms/Unit () Manufactured Home (Size x # of Bedrooms Garage Deck Comments: () Number of persons per household () Business Sq. Ft. Retail Space Type () Industry Sq. Ft Type () Industry Sq. Ft Type
Address: 2208 ANG EX KO City: FOCAL DATE CAPITAL BUILDERS: 420 Phone # (9/9) 639 4429 PAPPLICANT: SCATTLE CAPITAL BUILDERS: 420 Six Focks Rd City: Parellan State: NC zip: 276 Of Phone #: 9/9 571-7966 PROPERTY LOCATION: SR #: 1448 SR Name: Atlins Road Parcel: 04-065-024-06 PIN: 0665-61-1752 Zoning: RA-30 Subdivision: Rudy Annuard Lot #: 4 Lot Size: 1.32 AC Flood Plain: Panel: 50 Watershed: IV Deed Book/Page: 0936/0907 Plat Book/Page: 2011 Map PROPOSED USE: Sg. Family Dwelling (Size x) # of Bedrooms Basement Garage Deck Multi-Family Dwelling No. Units No. Bedrooms/Unit Manufactured Home (Size x) # of Bedrooms Garage Deck Comments: Number of persons per household Business Sq. Ft. Retail Space Type
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City: \$\frac{129}{120}\$ State: \$\frac{1}{12}\$ Coll 12\$\$ PROPERTY LOCATION: \$\text{SR}\$ #: \$\frac{1}{14}\$ \$\text{S R Name}\$: \$\frac{1}{12}\$ A \$\frac{1}{12}\$ Lot \$\text{Size}\$: \$\frac{1}{32}\$ AC Parcel: \$\frac{04}{120}\$ - \$\frac{1065}{120}\$ - \$\frac{102}{120}\$ - \$\frac{1}{120}\$ Book/Page: \$\frac{1}{120}\$ Ac Lot #: \$\frac{1}{120}\$ Lot Size: \$\frac{1}{32}\$ AC Flood Plain: \$\frac{1}{120}\$ Panel: \$\frac{50}{120}\$ Watershed: \$\frac{1}{12}\$ Deed Book/Page: \$\frac{0936}{120}\$ \frac{1}{120}\$ Plat Book/Page: \$\frac{1}{120}\$ \text{Map}\$ PIN: \$\frac{1}{120}\$ Old 5- \$\frac{1}{120}\$ To 5- \$\frac{1}
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Parcel:
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Zoning:RA_30 Subdivision:
PROPOSED USE: Sg. Family Dwelling (Size x # of Bedrooms Basement Garage Deck Multi-Family Dwelling No. Units No. Bedrooms/Unit Garage Deck Deck No. Bedrooms Garage Deck Deck Deck No. Bedrooms Garage Deck Deck Deck Deck Deck Deck Deck Dec
PROPOSED USE: (
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Manufactured Home (Sizex) # of Bedrooms Garage Deck Comments:
Comments:
(_) Number of persons per household (_) Business Sq. Ft. Retail Space Type
() Business
industry 54.11.
() Home Occupation (Sizex) # Rooms Use
() Accessory Building (Size x) Use
(X) Addition to Existing Building (Size 30 x ZZ) Use Garage.
() Other
Water Supply: (X) County () Well (No. Iwellings) () Other
Sower: (X) Septic Fank/ Existing: YES (NO) County () Other - EXISTING Septic M Orthografic
Sower: (X) Septic Fank/ Existing: YES (NO) County () Other — EXISTING Septic on property Erosion & Sedimentation Control Plan Required? YES (NO) Structures on this tract of land: Single family dwellings Manufactured homes Other (specify) Manufactured homes Other (specify)
Structures on this tract of land: Single family dwellings Manufactured homes Other (specify)
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? YES NO
Required Property Line Setbacks: Minimum Actual Minimum Actual
Front 35 97 Rear 25 200
Side
Nearest Building
If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications or
plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.
* Jan Dicken (2) 1-14-2000

