Conf. 10/2/95

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION, PO BOX 09, LILLINGTON, NC 27546
APPLICATION FOR IMPROVEMENT PERMIT

DATE Sept 26, 1995

NAME Carl BareFoot TELEPHONE NO. 893-9200

ADDRESS (current) Rt 3 Box 376-A Lillington.

PROPERTY OWNER Carl BareFoot

SUBDIVISION NAME _____ LOT NO. _____

STATE ROAD NAME 27 STATE ROAD NO. _____

DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES ✓ NO _____
IF NO, YOU MUST SHOW A PURCHASE AGREEMENT OR OTHER AUTHORIZATION.

DIRECTIONS Take 27 out of Lillington, go past [redacted], Doc's Rd, go into curve down the Hill, top Hill, turn LEFT on top of Hill, follow dirt road to House of Allie BareFoot

SIZE OF LOT OR TRACT 22 acres

Type of dwelling Mobile Home Basement with plumbing N/A
Number of bedrooms 3 Garage N/A
Dishwasher N/A Garbage disposal N/A

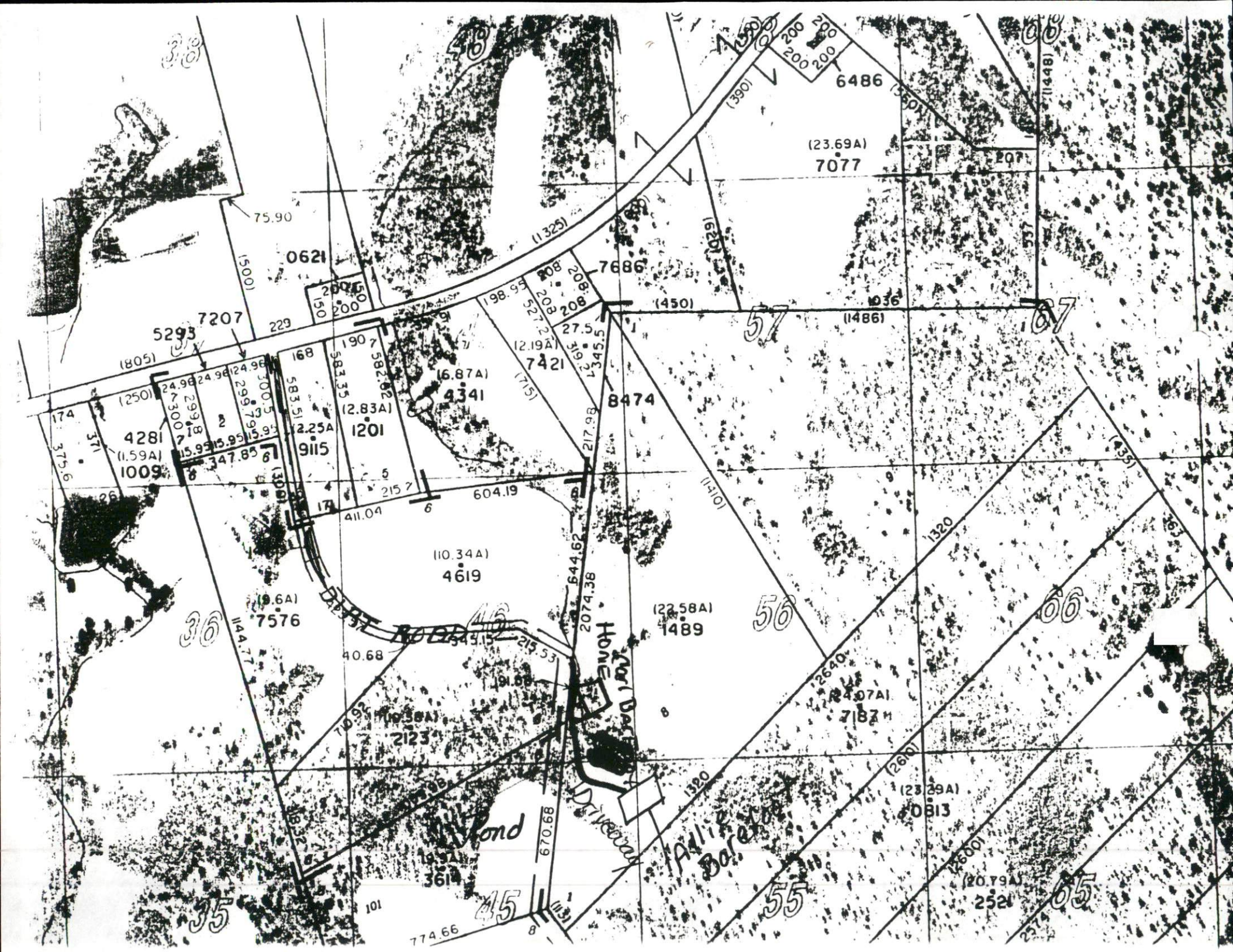
WATER SUPPLY: PRIVATE WELL ✓ COMMUNITY SYSTEM _____ COUNTY _____

1) A surveyed and recorded map must be attached to this application along with a site plan showing: 1)Location of dwelling, 2)Location of driveway, 3)Location of any wells and other existing structures. A copy of the deed must also be attached.
2) Read and complete all items in the "Instructions for Soil Evaluation."
3) If your property is located in the Northern Half of the county (North of the Cape Fear River) a **zoning permit** must be obtained from the Planning Department before an improvement permit can be issued by this department.

This certifies that all of the above information is correct to the best of my knowledge. Any false information will result in the denial of the permit. Once the permit is issued, it is good for a period of five years. **The permit is subject to revocation if the site plan, intended use, or ownership change.**

Signature of Owner or Authorized Agent ONLY Carl Barefoot

Revised (6/95)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Home
Driveway
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Allie Bare
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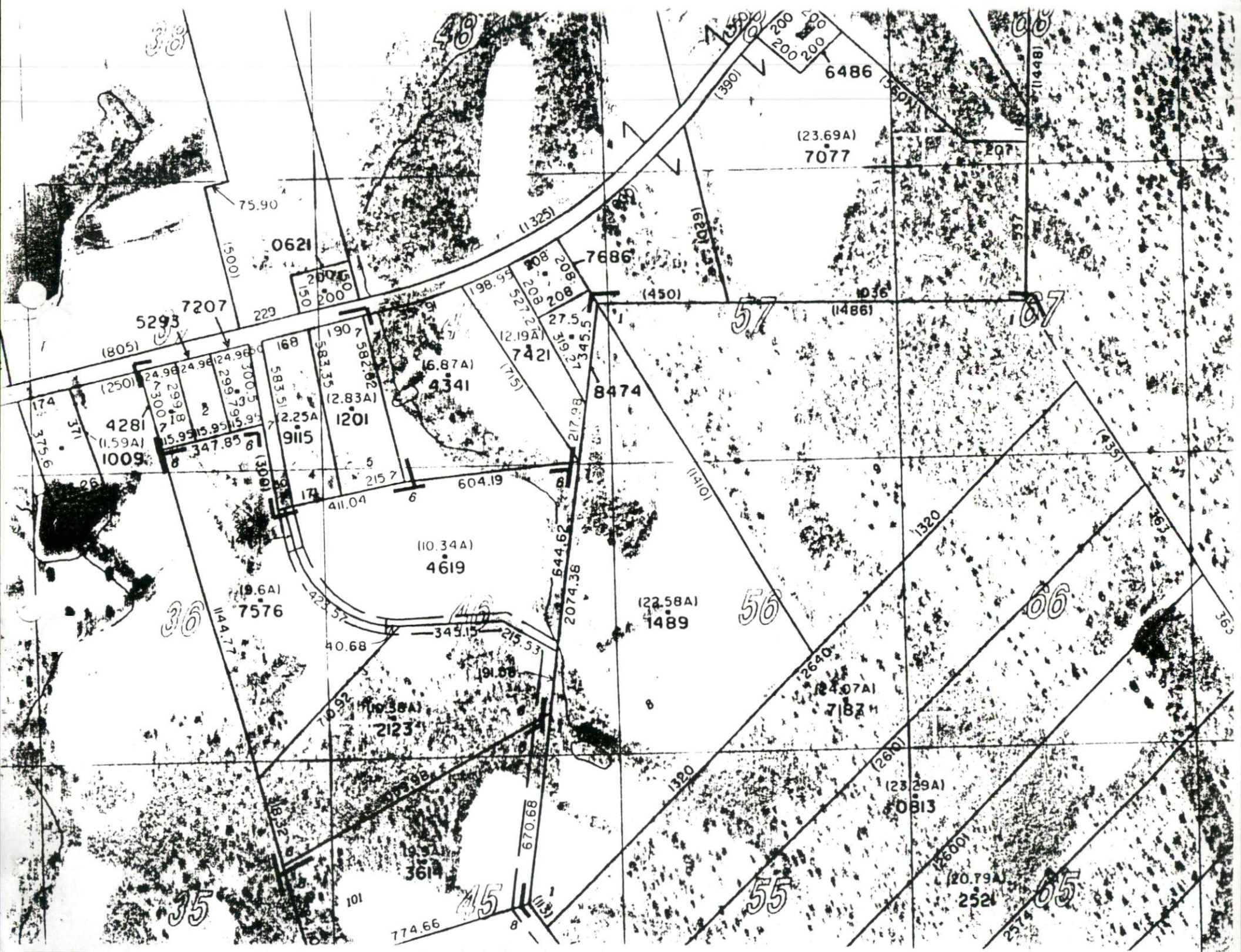
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