HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION APPLICATION FOR IMPROVEMENT PERMIT

DATE 1/24/94
NAME LARRY K. ALLEN TELEPHONE NO. 499-5816
NAME LARRY K. ALLEN TELEPHONE NO. 499-5816 ADDRESS(current) RT. 6, Box 300-B, SANFORD, N
PROPERTY OWNER STONE HEDGE TROPERTIES
SUBDIVISION NAME HIGHLAND HILLS 4 LOT NO.
PROPERTY ADDRESS 9405 GIBBS RD STATE ROAD NO. S.E. 114
DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES NO
IF No EXPLAIN
DIRECTIONS # 27 WEST FROM LILLINGTON TO S.R. 1161
(DOC'S P.P.) THEN SOUTH TO S.R. 1141 (MICRO-TOWER
RD.) THEN WEST 2.3 MI. TO HIGHLAND HILES TO STITE OF LOT OR TRACT
SIZE OF BOT ON THE S
1. Type of dwelling P/W Basement with plumbing 2. Number of Bedrooms Garage 3. Dishwasher Garbage Disposal Permuting: 08 362
WATER SUPPLY - PRIVATE WELLCOMMUNITY SYSTEMCOUNTY
A <u>plot plan</u> 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.
Confined - 1-25-54 Signature Law K. Allen Revised (3-91)
Revised (3-91)

SITE EVALUATION FORM

SPECIFY: S (suitable) P (provisionally) U (unsuitable)

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