HA TT COUNTY HEALTH DEPART T IRONMENTAL HEALTH SECTI APPLICATION FOR IMPROVEMENT PERMIT

DATE 8-1-95
NAME FOUR W'S INC. TELEPHONE NO. 892-/23/
ADDRESS (current) P.O. BOX 608 DUNN, N.C. 28335
PROPERTY OWNER FOUR W'S INC.
SUBDIVISION NAME MEADOW BROOK SECT. III LOT NO. //
PROPERTY ADDRESS 1801 Ashley DR. Angier N.C. STATE ROAD NO. 1513
DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES NO
IF No EXPLAIN
DIRECTIONS TAKE ZIO TO HARNET CENTRAL Rd. T/R Go to
Neills CK. Rd. T/L Go to 2ND Rd en: Left. T/L Go
to LAST LOT ON Right
SIZE OF LOT OR TRACT . 86
1. Type of dwelling <u>SFO</u> 2. Number of Bedrooms <u>3</u> 3. Dishwasher <u>V</u> 4. Garbage Disposal <u>NO</u> Basement with plumbing <u>NO</u> Garage <u>Yes</u>
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.

Owner's Signature

Revised (3-91)

SCALE : 1" = 50'

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		SITE PLAN AP District 24-3 Cadrooms	PROVAL SUSSE SFR
198.40'		8/1/95	M. Mahlke Zoning Administration
		K	
		Neu	cornel
	3		
4			1.0-325L 32-365C
	р Л		2.0-305L 30-365C
4	2	25	3.0-12.5L 12-32 SZ 32+ PA/Soi
		2.00	90-305L 30-365C 50-705C 34-365C
. , ,	0		4 Wet 2 wet
	21		
28' 57'	W 15		cont meet on site
	13.		on contour
	U DA		
	6		
	1457		
30'			

County of Harnett

ZONING PERMIT

Nº 3613

Date August 1, 1995

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Owner Four W's Inc.	
Address: po Br 608 Dunn NC 28335	
Zoning District: RA - 30	
Use Classification: SFR 3 hedroms	man
Provided the person accepting this permit shall in every respect conform to the terms of the second state.	7901
Provided the person accepting this permit shall in every respect conform to the terms of the application on development in Harnett County. Any VIOLATION of the terms above stated immediately REVOKES this	

NOTICE: This structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued by the Building Official.

PERMIT EXPIRES SIX MONTHS FROM DATE OF ISSUANCE.

PLANNING DEPARTMENT 893-7525