1.2.94

HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION, PO BOX 09, LILLINGTON, NC 893-7547 APPLICATION FOR IMPROVEMENT PERMIT

| DATE /-6-94 |
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| NAME James E. Lamm TELEPHONE NO. 893-2597 |
| ADDRESS (current) PO Box 403 Lillington M.C. 27546 |
| PROPERTY OWNER James E. Lamm |
| SUBDIVISION NAME Kellam LOT NO// |
| PROPERTY ADDRESS Powell Farm Rd. STATE ROAD NO 1/26 |
| DO YOU HAVE A LEGAL DEED TO THIS PROPERTY? YES IF NO |
| DIRECTIONS lake 210 South turn Right anderson Ck sch. Rd |
| turn Right on Lamuel Black Rd turn Right on Powell |
| farm rd. go to kellam sign turn Right - Second lat an Righ |
| SIZE OF LOT OR TRACT . 46 A |
| 1. Type of dwelling Rouble wide Basement with plumbing 2. Number of Bedrooms 3 Garage 3. Dishwasher / Panul No. 7466 4. Garbage Disposal |
| 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. |
| Signature of Owner fames & Lamm Revised (3-93) or Authorized Agent ONLY. |