



COUNTY OF HARNETT

Receipt: _____

Permit: 7455Date: 8-27-97

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:

NAME Wayne + Joy Farrar
ADDRESS Rt. 3 Box 231
Lillington, NC 27546
PHONE 893-8952 W 814-2387 H

APPLICANT INFORMATION:

NAME _____
ADDRESS _____
PHONE _____ W _____ H _____

PROPERTY LOCATION:

Street Address Assigned _____

SR # 1239 RD. NAME Falcon Rd. TOWNSHIP 13 FIRE _____ RESCUE _____TAX MAP NO. 0519-43 PARCEL NO. 1845 FLOOD PLAIN X PANEL 90SUBDIVISION Edna K. Mason Estate LOT # _____ LOT/TRACT SIZE 39.51 AZONING DISTRICT NA DEED BOOK 1185 PAGE 626WATCHED DIST. NA WATER DIST. _____ PLAT BOOK F PAGE 643-DGive Directions to the Property from Lillington: Take McDougald Rd. W. Turn left on Falcon Rd. Site is on Right.

PROPOSED USE

- ☐ Single Family Dwelling (Size _____ x _____) # of Bedrooms _____ Basement _____
Garage _____ Deck _____ (size _____ x _____)
☐ Multi-Family Dwelling No. Units _____ No. Bedrooms/unit _____
☒ Manufactured Home (Size 12 x 60) # of Bedrooms 1 Garage No
Deck No (size _____ x _____)
☒ Number of persons per Household 1
☐ Business SqFt Retail Space _____ Type _____
☐ Industry SqFt. _____ Type _____
☐ Home Occupation No. Rooms/size _____ Use _____
☒ Accessory Bldg. Size 12 x 60 Use Office
☐ Addition to Existing Bldg. Size _____ Use _____
☐ Sign Size _____ Type _____ Location _____
☒ Other office 12 x 60 (manufactured Home)

Water Supply: ☒ County ☐ Well (No. dwellings _____) ☐ Other _____
Sewer: ☒ Septic Tank (Existing? No) ☐ County ☐ Other _____
Erosion & Sedimentation Control Plan Required? Yes _____ No ☒
Are there any wells not on this lot but within 40 ft of the property line No (show on Site Plan).

*NOTE: A Site Plan must be attached to this Application, drawn to scale on an 8.5 by 11 sheet, showing: existing and proposed buildings, garages, driveways, decks, accessory buildings, well, and any wells within 40 feet of your property line.

A recorded deed and recorded plat are also required.

Conf# 962
8-28-97

SETBACK REQUIREMENTS

Front property line
 Side property line
 Corner side line
 Rear Property Line
 Nearest building
 Stream
 Percent Coverage

Actual

250
200

420
150

Minimum/Maximum Required

35
10
15
25
10

Are there any other structures on this tract of land? yes
 No. of single family dwellings 1 No. of manufactured homes
 Other (specify & number) 1 pack house

NA Does the property owner of this tract of land own any land that contains a manufactured home within five hundred feet of the tract listed above? Yes No

I hereby **CERTIFY** that the information contained herein is true to the best of my knowledge; and by accepting this permit shall in every respect conform to the terms of this application and to the provisions of the Statutes and Ordinances regulating development in Harnett County. Any VIOLATION of the terms above stated immediately REVOKES this PERMIT. I further understand this structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued. This permit expires six months from date issued.

Walter L. Lora
 Landowner's Signature
 (Or Authorized Agent)

8/27/97
 Date

FOR OFFICE USE ONLY

Copy of recorded final plat of subdivision on file? ✓

Is the lot/tract specified above in compliance with the Harnett County Subdivision Ordinance? ✓
 Watershed Ordinance?
 Mobile Home Park Ord?

ISSUED ✓

DENIED

Comments: To be used as app

Tom L.
 Zoning/Watershed Administrator

8-27-97

Date

C:\WPC\FORMS\FDLUPERM

