COUNTY OF HARNETT

Fee: 2000 ENUN. HEALTH

Receipt:

Per 00.5385

Date: 8-5-96

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT PROPERTY DESCRIPTION/LAND USE PERMIT APPLICANT INFORMATION: LANDOWNER INFORMATION: NAME Dwight NAME Annie Flynn ADDRESS 2925 Swann Station Rd Sanford NC 27330 ADDRESS 2925 Swann Station Rd Sanford NC 27330 PHONE 499-6966 W PROPERTY LOCATION: Street Address Assigned SR # 1109 RD. NAME Mellerson W. TOWNSHIP 09 FIRE RESCUE TAX MAP NO. 9563-11 PARCEL NO. 6887 FLOOD PLAIN X PANEL 150 SUBDIVISION Dwight David Flynn LOT # ZLOT/TRACT SIZE 1.35 A DEED BOOK 912 PAGE 751 ZONING DISTRICT NA WATSHED DIST. THE WATER DIST. PLAT BOOK F PAGE 9-4 Give Directions to the Property from Lillington: Hwy 21 west to Stap Sign, Left on 24/27 take right in Front of Atkins Crocery onto Cameron Hill Road go to Stop Sign, take left on to McPherson, Rd (Dead End Road) Third lot on Right (Beside beige double wide) PROPOSED USE (_) Sg Family Dwelling(Size__x__) # of Bedrooms__ Basement___ Garage _____ Deck_____(size___x___)

(_) Multi-Family Dwelling No. Units____ No. Bedrooms/unit_ (Manufactured Home (Size 24 × 50) # of Bedrooms 3 Garage No Deck <u>N6</u> (size___x___) (Number of persons per Household 2 (_) Home Occupation No. Rooms/size_____Use___ (_) Accessory Bldg. Size_____Use (_) Addition to Existing Bldg. Size_____Use_ (_) Sign Size Type Location (_) Other___ Water Supply: (_) Well (No. dwellings___) (_) Other Sewer: (_ Septic Tank (Existing? 10) (_) County (_) Other Erosion & Sedimentation Control Plan Required? Yes Are there any wells not on this lot but within 40 ft of the property line 10 (show on Site Plan). *NOTE: A Site Plan must be attached to this Application, drawn

A recorded deed and recorded plat are also required.

property line.

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

SETBACK REQUIREMENTS Front property line Side property line Corner side line Rear Property Line Nearest building Stream Percent Coverage	Actual Minimum	n/Maximum Required
Are there any other struc	tures on this tract o	f land? <u>NO</u>
No. of single family dwel Other (specify & number)_	ings No. or mand	11 ac car eo 110 mes
Does the property owner contains a manufactured halisted above? Yes	ome within five hundr	d own any land that ed feet of the tract
I hereby <u>CERTIFY</u> that the the best of my knowledge every respect conform to provisions of the Statut in Harnett County. Any immediately <u>REVOKES</u> this structure is not to be on is issued. <u>This permit extended</u>	; and by accepting to the terms of this appears and Ordinances required the STATION of the Coupled until a CERTICALIVE SIX MONTHS from	his permit shall in plication and to the pulating development terms above stated er understand this FICATE OF OCCUPANCY n date issued.
Landowner's Signature (Or Authorized Agent)		might David Flym 8-5-94
*********	**************	*******
FOR OFFICE USE ONLY	·	
Copy of recorded final p	lat of subdivision on	file? YES
Is the lot/tract specific County Subdivision Ordina Watershed Ordinand Mobile Home Park (ance?	ce with the Harnett
ISSUED	DENIED	
Comments:		
T. Taylor	5	Aug 96
Zoning/Watershed Adminis		Date

C:\WP2\FORMS\PDLUPERM

