



COUNTY OF HARNE

E. A.

Fee: 20

Receipt: Permit: 37

Date: 3/31/97

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:

NAME Robert R. French & Wife
ADDRESS RT 5, Box 222
LILLINGTON, N.C.
PHONE 910-893-9584

APPLICANT INFORMATION:

NAME _____
ADDRESS _____
PHONE _____ W _____

PROPERTY LOCATION:

Street Address Assigned _____

SR # 1271 RD. NAME Shue Rd TOWNSHIP 13 FIRE _____ RESCUE _____

TAX MAP NO. 9692 52 PARCEL NO. 4030 FLOOD PLAIN X PANEL 15

SUBDIVISION _____ LOT # _____ LOT/TRACT SIZE 1.16

ZONING DISTRICT N/A DEED BOOK 1189 PAGE 506

WATCHED DIST. N/A WATER DIST. _____ PLAT BOOK TAX MAP

Give Directions to the Property from Lillington: 421 N. to HOLLY SPRINGS CURCH RD. (SR 1273) turn left onto Pines Rd. turn left on Shue Rd (SR 1271); property on right about 1/4 mile from Lee County

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 65) # of Bedrooms 2 Garage _____
Deck _____ (size _____ x _____)
☒ Number of persons per Household 2
☐ Business SqFt Retail Space _____ Type _____
☐ Industry SqFt. _____ Type _____
☐ Home Occupation No. Rooms/size _____ Use _____
☐ Accessory Bldg. Size _____ Use _____
☐ Addition to Existing Bldg. Size _____ Use _____
☐ Sign Size _____ Type _____ Location _____
☐ Other _____

Water Supply: ☒ County ☐ Well (No. dwellings _____) ☐ Other _____
Sewer: ☒ Septic Tank (Existing? NO) ☐ County ☐ Other _____
Erosion & Sedimentation Control Plan Required? Yes _____ No X
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.

SETBACK REQUIREMENTS

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

Actual

50
15
-
370
-
335
-

Minimum/Maximum Required

35
10
15
25
10
-
-

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

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 X

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.

Robert R. French
Landowner's Signature
(Or Authorized Agent)

3-3-97
Date

FOR OFFICE USE ONLY

Copy of recorded final plat of subdivision on file? NO

Is the lot/tract specified above in compliance with the Harnett County Subdivision Ordinance? ✓

Watershed Ordinance? ✓

Mobile Home Park Ord? ✓

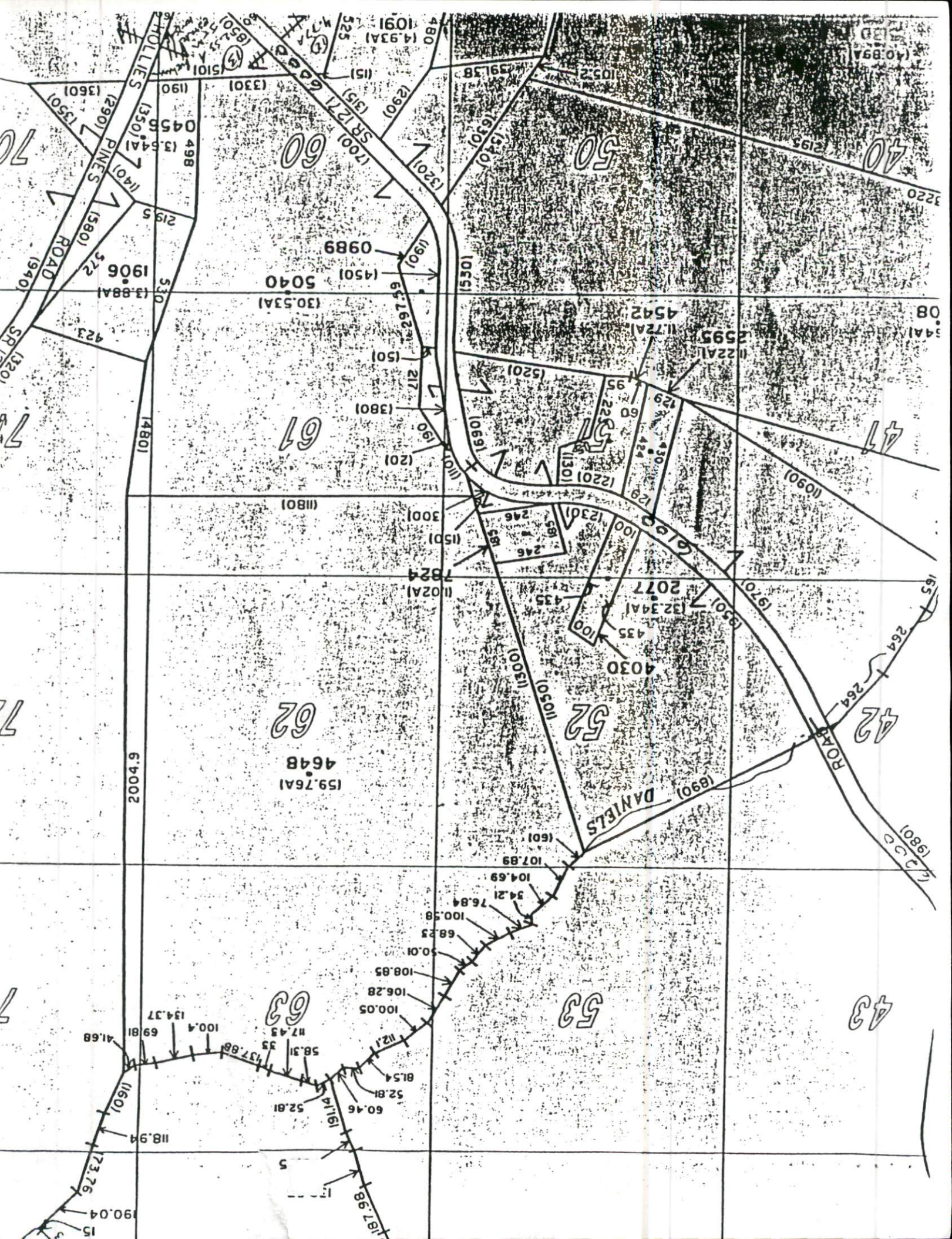
ISSUED _____

DENIED _____

Comments: _____

Lisa S. Yant
Zoning/Watershed Administrator

3.3.97
Date



525.4

11/11/2020

PH
1/1

1. 2 AC
T. 2000
L. 2000

1378

12/1/85

[illegible]

SITE PLAN APPROVAL

DISTRICT: N/E USE: SUMMIT
#BEDROOMS: 2

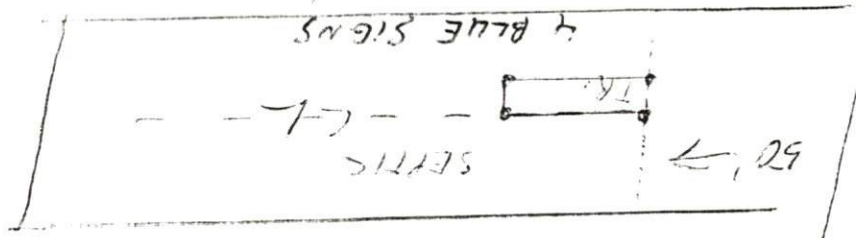
3.3.97

~~Zoning Administrator~~

Report of Forest Visited Shae Street
Little River Township Northwest Co. N.C.
Get Out 278 3:39 Arrived Co. Reg. N.C.
115 100-

$$1m = 1Ac$$

like this to have more room to
 adjust for the optic system.
 Patient H. ranch
 Lucy



1271
 SH 45