

Initial Application Date: 2/8/2000

Application #00-_____

011258

COUNTY OF HARNETT LAND USE APPLICATION

Planning Department

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525

Fax: (910) 893-2793

LANDOWNER: Michael Ray
City: Lillington

Address: 3417 Spring Hill Ch Rd
State: N.C. Zip: 27546 Phone #: 910 893 2246

APPLICANT: same
City: _____ State: _____ Zip: _____ Phone #: _____

PROPERTY LOCATION: SR #: 1265 SR Name: Cool Springs Road
Parcel: 13-002-0088 PIN: 0611-93-7011
Zoning: RA-20R Subdivision: Mason Hill Lot #: 26 Lot Size: .50 AC
Flood Plain: X Panel: 80 Watershed: IV Deed Book/Page: 1390/177 Plat Book/Page: 2000/56

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 North 7 miles, Right on Cool Springs Road property, 1 1/2 miles on the right

PROPOSED USE:

- Sg. Family Dwelling (Size ___ x ___) # of Bedrooms _____ Basement _____ Garage _____ Deck _____
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size 28 x 80) # of Bedrooms 3 Garage _____ Deck _____
- Business Sq. Ft. Retail Space _____ Type _____
- Industry Sq. Ft. _____ Type _____
- Home Occupation (Size ___ x ___) # Rooms _____ Use _____
- Accessory Building (Size ___ x ___) Use _____
- Addition to Existing Building (Size ___ x ___) Use _____
- Other _____

Water Supply: County Well (No. dwellings _____)
sewer: Septic Tank/ Existing: YES NO _____ County
Erosion & Sedimentation Control Plan Required? YES NO _____

Comments: *A deed or offer to purchase must be provided prior to issuance of set-up permit. The deed or offer to purchase must be in separate ownership for each individual lot in Mason Hill Subdivision.

1. **Manufactured home must have a pitched roof.**
2. **Manufactured home must have underpinning.**
3. **Moving apparatus must be removed, under pinned, or landscaped.**
4. **Steps 2 & 3 completed w/in 60 days of C.O. issuance.**

Structures on this tract of land: Single family dwellings _____ Manufactured homes 1 Other (specify) _____
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? YES NO _____

Required Property Line Setbacks:	Minimum	Actual	Minimum	Actual
Front	<u>35</u>	<u>70</u>	Rear	<u>25</u> <u>55</u>
Side	<u>10</u>	<u>30</u>	Corner	<u>—</u> <u>—</u>
Nearest Building	<u>10</u>	<u>—</u>		

If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications or plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Signature of Applicant: Michael Ray

Date: 2-8-2000

SITE PLAN APPROVAL

DISTRICT RA-20 USE DWELL

#BEDROOMS 3

Date

Zoning Administrator

Requirements

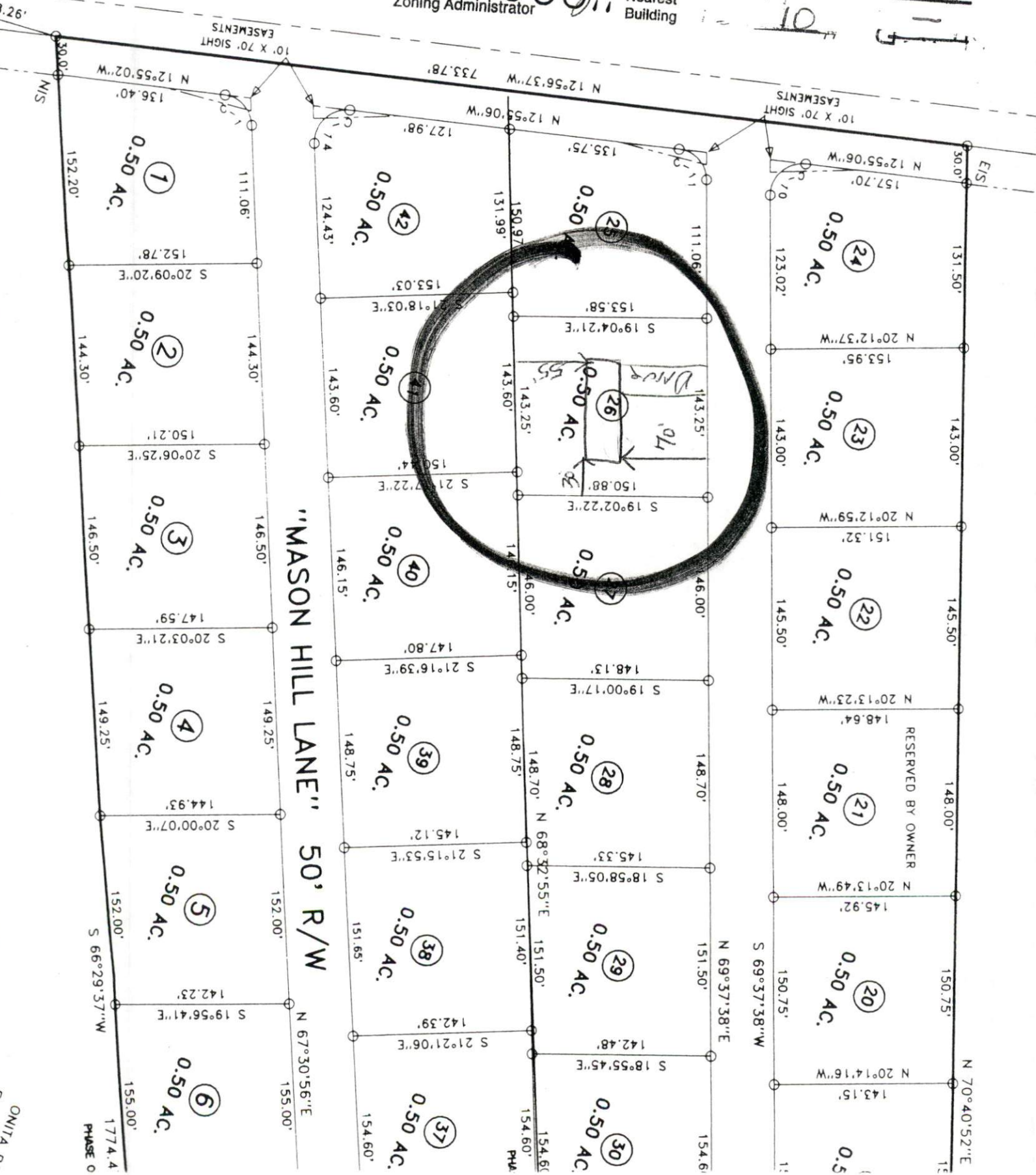
Front
Side
Corner
Rear
Nearest Building

Property Line Setbacks

Minimum	Actual
35	70
10	30
1	1
25	55
10	1

ROAD EAST

[Handwritten signature]



ONITA P.

Harnett County
102 EAST FRONT ST
P O BOX 65
LILLINGTON NC 27546

DATE: 3/09/00
TIME: 15:07:10

RECEIPT #: 0000001168
CASHIER: AMCNEIL

APPLICATION NBR: 00-40000204
REFERENCE: 9602

ITEM DESCRIPTION	PAID
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SEPTIC TANK APPL - NEW	100.00
TOTAL AMOUNT PAID:	100.00
PAYMENT TYPE: CHECK	
CHECK NBR: 000002332	