

Initial Application Date: 2/8/2000

EH

Application #00- 011271

COUNTY ... ARNETT LAND USE APPLICATION

Planning Department 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793

LANDOWNER: Michael Ray Address: 3417 Spring Hill Ch Rd  
City: Lillington State: N.C. Zip: 27546 Phone #: 910 893 2246

APPLICANT: Same Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

PROPERTY LOCATION: SR #: 1265 SR Name: Cool Springs Road  
Parcel: 13-0002-0088 PIN: 0611-93-7011  
Zoning: RH-20R Subdivision: Mason Hill Lot #: 39 Lot Size: .50  
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, 1/2 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 \_\_\_
- Number of persons per household 13
- 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 \_\_\_\_\_

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

Water Supply:  County  Well (No. dwellings \_\_\_)  
Sewer:  Septic Tank/ Existing: YES  NO  County  Other  
Erosion & Sedimentation Control Plan Required? YES  NO  
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>10</u>  | Rear    | <u>25</u>  |
| Side                             | <u>10</u> | <u>30</u>  | Corner  | <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.

Michael Ray  
Signature of Applicant

2-8-2000  
Date

MARY WOMACK

### Required Property Line Setbacks

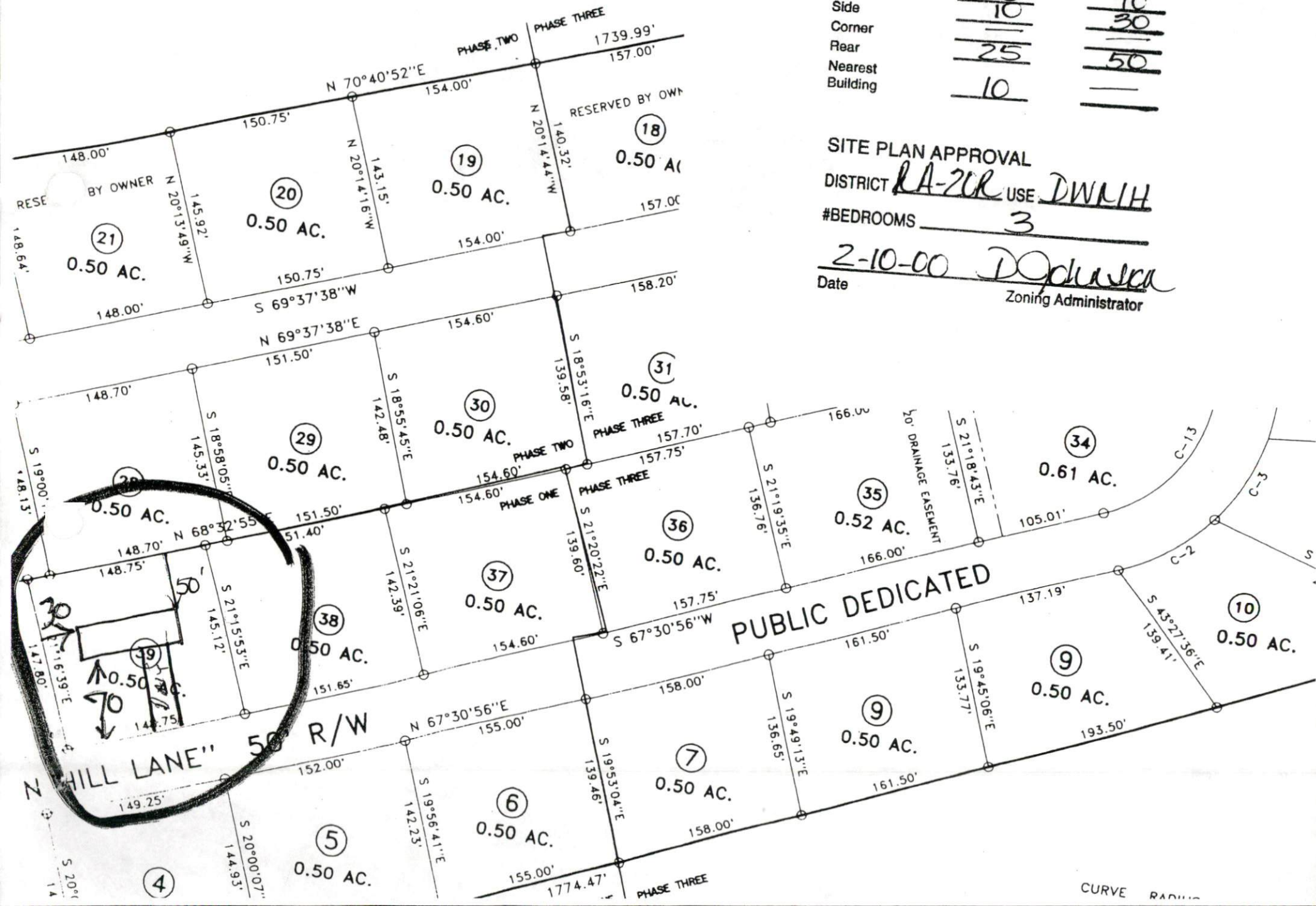
|                  | Minimum   | Actual    |
|------------------|-----------|-----------|
| Front            | <u>35</u> | <u>70</u> |
| Side             | <u>10</u> | <u>30</u> |
| Corner           | <u>—</u>  | <u>—</u>  |
| Rear             | <u>25</u> | <u>50</u> |
| Nearest Building | <u>10</u> | <u>—</u>  |

SITE PLAN APPROVAL

DISTRICT RA-20R USE DWMIH

#BEDROOMS 3

Date 2-10-00 D. Poplawski  
Zoning Administrator



CURVE RADIUS

Harnett County  
102 EAST FRON T  
P O BOX 65  
LILLINGTON NC 27546

DATE: 3/09/00  
TIME: 16:11:52

RECEIPT #: 0000001182  
CASHIER: AMCNEIL

APPLICATION NBR: 00-40000218  
REFERENCE: 9602

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