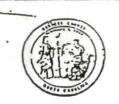
HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION, PO BOX 09, LILLINGTON, NC 893-7547 APPLICATION FOR IMPROVEMENT PERMIT

NAME KILARNOLD CORPORATION TELEPHONE NO. 919-499-2552 ADDRESS(current) 5004 Independence Way, Cameron, NC 28326 PROPERTY OWNER KILARNOLD CORPORATION SUBDIVISION NAME HERITAGE VILLAGE LOT NO. PROPERTY ADDRESS STATE RD. NO.__ DO YOU HAVE A LEGAL DEED TO THIS PROPERTY ? YES___ PLEASE SHOW A PURCHASE AGREEMENT OR AUTHORIZATION OF AUTHORITY IF NO EXPLAIN DIRECTIONS High way 24 past highway 87 West of intersection .7 miles on left SIZE OF LOT OR TRACT Lots 20,000 square feet or better Type of dwelling ____ DW ___ Basement with plumbing___ 1. Number of Bedrooms_____3 ___ Garage_____ 2. 3. Dishwasher____ YES Garbage Disposal_ NO WATER SUPPLY - PRIVATE WELL ___ COMMUNITY SYSTEM ___ COUNTY X A plot plan must be attached to this application showing: 1) Setting of dwelling, 2) Desired placement of septic tank system and 3) Well placement. Place stakes at the exact location of dwelling and at each corner of lot. An on site inspection must be made, which consists of a soil evaluation. A zoning permit must be obtained from the Planning Department before an improvement permit can be issued by this department. This certifies that all the above information is correct to the best of my knowledge and any false information will result in the denial of permit. Once the permit is issued, the permit is good for a period of 5 years. The permit is subject to revocation if site plans or the intended use change. KILARNOLD CORPORATION

Signature of Owner BY:

Revised (3-93) or Authorized Agent ONLY.



COUNTY OF HARNE __ 007247

Permit: 72

Date: 7.9.9

APPLICATION FOR ENVIRONMENTAL HEALTH IMPROVEMENT PERMIT

PROPERTY DESCRIPTION/LAND USE PERMIT

LANDOWNER INFORMATION:	APPLICANT INFORMATION:			
NAME Kilarnold Corporation ADDRESS 5004 Independence Way Cameron, NC 28326 PHONE (919) 499-2552	NAME Kilarnold Corporation ADDRESS 5004 Independence Way Cameron, NC 28326 PHONE (919) 499-2552			
PROPERTY LOCATION: Street Address Assigned	iamsburg Way			
	OWNSHIP 09 FIRE RESCUE			
	IT. 84 FLOOD PLAIN X. PANELO150-D			
SUBDIVISION Heritage Village PH VL BLF LOT # COT LOT/TRACT SIZE				
ZONING DISTRICT N/A	DEED BOOK 924 PAGE 326 ON FIL			
WATSHED DIST. N/A WATER DIST.	N/A PLAT BOOK PAGE			
Give Directions to the Property HWY 27 W To HWY 87 S, Turn onto F	from Lillington: WY 24 W, Left into Heritage Village			
Garage Deck (_) Multi-Family Dwelling No. U (X) Manufactured Home(Size 28 x 4 Deck Yes (size 8 x 16) (X) Number of persons per Househ (_) Business SqFt Retail Spac (_) Industry SqFt. (_) Home Occupation No. Rooms/ (_) Accessory Bldg. Size (_) Addition to Existing Bldg. S	nitsNo. Bedrooms/unit 8 # of Bedrooms_3_ Garage)Rear			
Sewer: (<u>y</u>) Septic Tank (Existin Erosion & Sedimentation Control Are there any wells not on the property line <u>NO</u> (show on Site *NOTE: A Site Plan must be attacked)	Plan). thed to this Application, drawn,			
to scale on an 8.5 by 11 proposed buildings, gara buildings, well, and any	sheet, showing: existing and ges, driveways, decks, accessor wells within 40 feet of your			

A recorded deed and recorded plat are

SETBACK REQUIREMENTS	Actual	Minimum/Maximum	Required
Front property line Side property line	44	35	· ricquar cu
Corner side line	-3.4	10	
Rear Property Line	.89	3	
Nearest building Stream		10	
Percent Coverage			
Are there are the			
Are there any other structure No. of single family dwell	tures on this t	ract of land?	No
No. of single family dwell Other (specify & number)_	ings o No.	of manufactured	homes_1_
		,	
Does the property owner contains a manufactured b	of this tract	of land own any	land that
contains a manufactured h		hundred feet or	f the tract
I hereby CEPTIEV that the			
I hereby <u>CERTIFY</u> that the the best of my knowledge every respect conform to	information co	ontained herein	is true to
every respect conform to provisions of the Statute	the terms of th	ting this permit	t shall in
in Harnett County. Any immediately REVOKES thi	VIOLATION of	the terms abo	ve stated
structure is not to be or is issued. This permit ex	pires six month	CERTIFICATE OF	OCCUPANCY
11 111 (2)	0/		uea.
Landowner's Signature	/~ -	1-9-9	7
(Or Authorized Agent)	V	Date	
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FOR OFFICE USE ONLY			Al .
Conv. of spended 4:-	(#) S		
Copy of recorded final pla	at of subdivision	on on file ?	
Is the lot/tract specifie County Subdivision Ordinar	d above is com	nliance with u	
,	ICE:	birgucs with th	e Harnett
Watershed Ordinance	?		• • •
Mobile Home Park Or	·d?	_	
ISSUED	DENIEL)	
Comments:			
11 - 17 0	1		
Man Pandaron	ush	7.9.97	•
Zoning/Watershed Administr	aftor	Data	

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