## 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.



Receipt:\_\_\_ COUNTY OF HARNI [ 007233 Permit:

Date: 7-9-9

Fee: 20

## 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	Connecticut Way
SR # NC 24 RD. NAME HWY 24 W	TOWNSHIP 09 FIRE RESCUE
	PLIT PANELOID PLAIN X. PANELOISO-D
SUBDIVISION Heritage Village PH VI.	BLE LOT # C-2/LOT/TRACT SIZE
ZONING DISTRICT N/A	DEED BOOK 924 PAGE 326 ON FILE
	. N/A PLAT BOOK F PAGE 731-C
Give Directions to the Property HWY 27 W To HWY 87 S, Turn onto	from Lillington:HWY 24 W, Left into Heritage Village
Garage Deck  Garage Deck  (_) Multi-Family Dwelling No.  (X) Manufactured Home(Size 28 x 16 x 1	UnitsNo. Bedrooms/unit
Sewer: ( <u>x</u> ) Septic Tank (Existi Erosion & Sedimentation Control	lell (No. dwellings) (_) Other ng?NO) (_) County (_) Other Plan Required? YesNo_X_ his lot but within 40 ft of the se Plan).
to scale on an 8.5 by 1:	ached to this Application, drawn , 1 sheet, showing: existing and ages, driveways, decks, accessory y wells within 40 feet of your

A recorded deed and recorded plat are

SETBACK REQUIREMENTS	Actual	Minimum/Maximum Required
Front property line	44	_35_
Side property line Corner side line	24	10
Rear Property Line		20 /3
Nearest building	_,152	_25_
Stream		_10
Percent Coverage		
, -		
i .		
Are there any other struc	tures on this	tract of land? No
WO. O. STRICTE LEWILL OWEL	lings O No	of manufactured homes 1
Other (specify & number)_	· · ·	
Does the property owner	of Abril 1	
contains a manufactured b	or this tract	of land own any land that
listed above? Yes	No v	e hundred feet of the tract
I hereby <u>CERTIFY</u> that the	information c	ontained herein is true to
		the terms above stated
The state of the s	E DEDMIT I	411
is issued This are in	Cliniand water -	OFFITTE -
is issued. This permit ex	arres six month	hs from date issued.
Will. ( ) inter		M-9 07
Landowner's Signature	<del>//~ '</del>	
107 Authorized Agent)	V	Date
7 012 77, 7		
************	**********	*************
	*	
FOR OFFICE USE ONLY		
Copy of spended time		
Copy of recorded final pla	it of subdivisi	on on file ?
Is the lot/tract considir		
Is the lot/tract specifie County Subdivision Ordinan	above in eon	mpliance with the Harnett
Watershed Ordinance	LE!	
Mobile Home Park Or	rd2	
/	u:	
ISSUED	DENIE	D
Consent		
Comments:		
	•	
m		7-9-97
Zoning/Watershed Administr	ator	Date
C:\WP2\FORMS\PDLUPERM		

