Application # 0050015720

COUNTY OF HARNETT LAND USE APPLICATION

1270886

Central Permitting

102 E. Front Street, Lillington, NC 27546

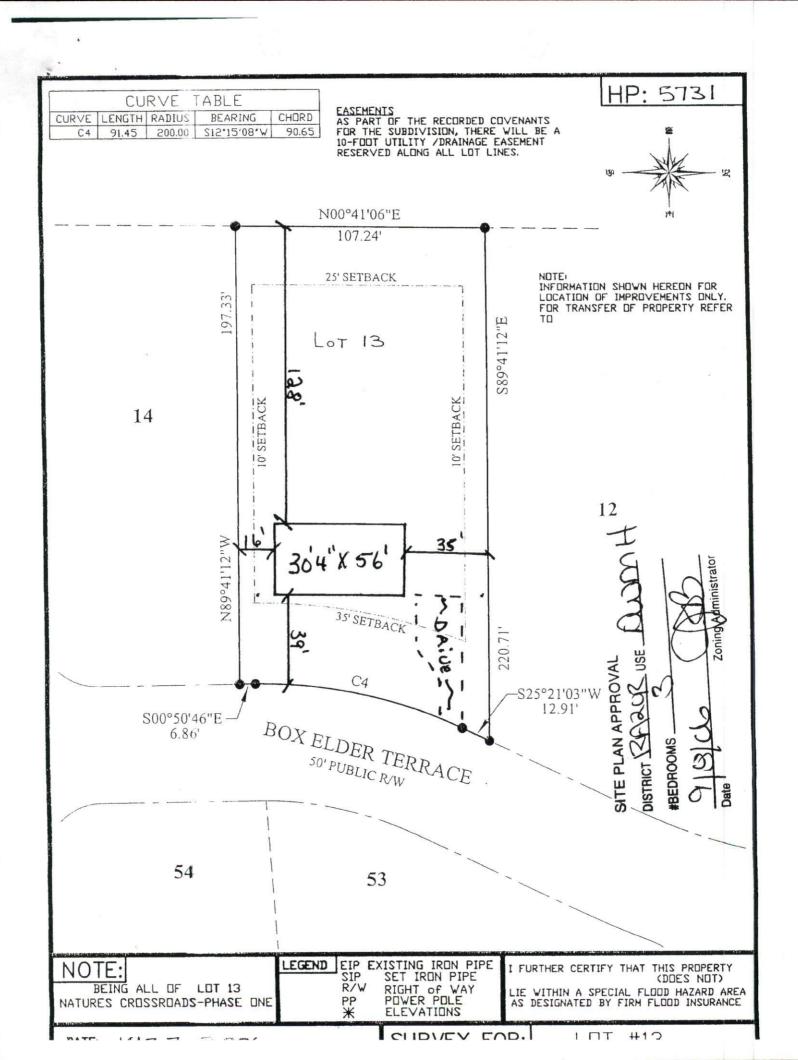
Phone: (910) 8934759

Fax: (910) 893-2793

LANDOWNER: Pine Grove Deve		Account to the second s	ailing Addres				
City: Sanford	Stat	e: Nc	Zip; 27332	Phon	e#- 919-498-2	204	
APPLICANT: same as above City: Cameron	Stat	NO	ailing Address Zip: 28326				
	Mature's Crossroad Watershed: OM LILLINGTON: Take	27 West - to F	Deed Bool		Plat Book/Pa Plat Book/Pa 3/64 24 - new subdiv	ision is on the right	
Terrace - Lot 13 is on the right side							
PROPOSED USE: □ Sg. Family Dwelling (Sizex_ □ Multi-Family Dwelling No. Units ■ Manufactured Horne (Size 30'4"x5 Comments:	No. Be	edrooms/Unit		_	_Garage	Dock	
□ Industry Sq. Ft. □ Home Occupation (Size □ Accessory Building (Size □ Addition to Existing Building (Size)			Type				
Other							
Water Supply: (X_) County (_) Sewage Supply: (X_) New Septic Tan Erosion & Sedimentation Control I Structures on this tract of land: Single f Property owner of this tract of land own I Required Property Line Setbacks:	k C_) Existing Septic Tar Plan Required? NO amily dwellings 0	nk () Cou	omes Proposed	(-) Other Other (specify) 0	above? NO		
		39'	_	25'	128'		
Front			Rear		Telephone Militi		
Side	10'	16'	Comer	35'	N/A		
Nearest Building	N/A 1	N/A					
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.							
amo Sovall (c)				per 8, 2006			
Signature of Owner or Owner's Agent	7			Date			

A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE PERMIT

^{• *}This application expires 6 months from the date issued if no permits have been issued"



County Health Department Application for Improvement Permit and/or Authorization to Construct

Improvement Permit	Authorization to Construct						
IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND AUTHORIZ SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration departments. (complete site plan = 60 months; complete plat = without expiration)	LATION TO CONSTRUCT						
APPLICANT INFORMATION Pine Grove Dev Corp 622 Buffalo Cake Rd 9194982204 Applicant Address Home & Work Phone							
Sanford NC27332							
Owner Address							
PROPERTY INFORMATION	Λ,						
Chritical Address VC 29324 Subdivision Name	Phase 1, 13 Section/Phase/Lot#						
Directions to Site: 27 W-to Hwy 24 -new 30 150nright post Brafford Estates across from a rt onto Redbird -turn left onto Box Elder	cot Size Launchy mat - turn - Cot 13 is 6h rish						
DEVELOPMENT INFORMATION New Single Family Residence □ Expansion of Existing System □ Repair to Malfunctioning Sewage Disposal System □ Non-Residential Type of Structure Non-Residential Type of Structure Residential Specification Maximum number of bedrees If expansion: Current number Will there be a basement? Plumbing fixtures in Basements Plumbing fixtures in Basements Plumbing fixtures Plumbing fixtures	ooms: 3 Der of bedrooms: 9 Dyes 800						
Non-Residential Specifications: Type of business: Total Square footage of Building.	:						
Maximum number of employees: Maximum number of seats:							
Water Supply: Are there any existing wells, springs, or existing waterlines or	n this property? yes o						
□ New well □ Existing Well □ Community Well □ Cublic V	Water ☐ Spring						
If applying for Authorization to Construct: Please Indicate Desired System Type(s):							
Accepted	☐ Any						
The Applicant shall notify the local health department upon submittal of this application if any of property in question. If the answer to any question is "yes", applicant must attach supporting doction of the site contain any jurisdictional wetlands? Does the site contain any existing wastewater systems?	umentation.						
☐ yes ☐ no ☐ Is any wastewater going to be generated on the site other than domestic sewage? ☐ yes ☐ no ☐ Is the site subject to approval by any other public agency?							
yes no Are there any easements or right of ways on this property?							
I have read this application and certify that the information provided herein is true, compounty and state officials are granted right of entry to conduct necessary inspections to applicable laws and rules. I understand that I am solely responsible for the proper identification property lines and corners and making the site accessible so that a complete site evaluation of the property owner's or owner's legal representative** signature (required)	letermine compliance with ification and labeling of all						