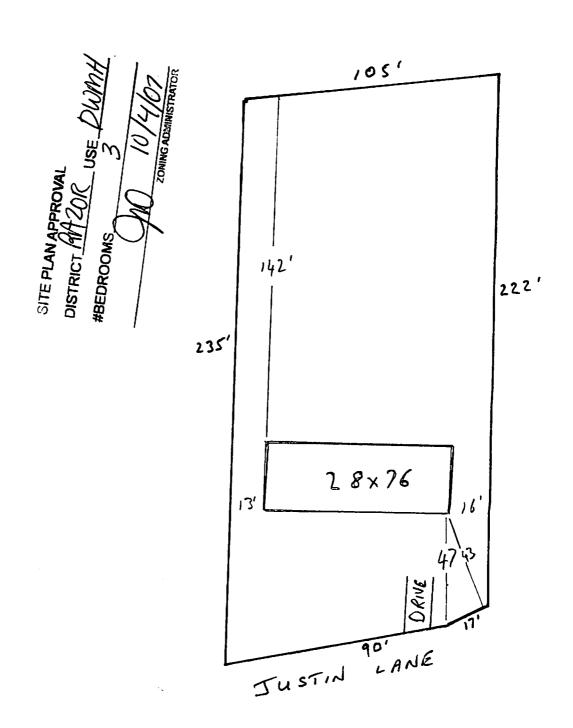
		HARNETT LAND USE A	APPLICATION	(910) 893-2793	www.ha	rnett.org
Central Permitting 108 E. Front Street, I ANDOWNER: MARK	_illington, NC 2/546	Phone. (910) 030-7.	2968	SPRING	Hice	RO
ANDOWNER: MARK	zuRKIN_	Mailing Address:	3000	16		
ANDOWNER: MAILE City: LILLINGTON	OLALE, ALCORATIO	Home #: [4 4	, , , , , ,	Contact #		
	. C C	Moiling Addroce:	4601	SECTION ST		
APPLICANT: CHOO EMOO HOM Dity: FAYETTEUICE		103 WK # 910	860 878	Contact #:	110 818	7731 com
Please fill out applicant information if different tha	State: AZIP:	PIOITIG W				
Please IIII out applicant into the Control of the C	B+ B		Lot #:	Lot S	Size:\$	<u>} </u>
PROPERTY LOCATION: SUBDIVISION: _	051 01	9575	-13-455	1.000		
Prease fill out applicant information if different that PROPERTY LOCATION: Subdivision:	<u> </u>	NIN:	109	-145 Man B	ook 2 Dage:	F/1/82D
1V17,417R = 121 - 1/10kHz.	Down Notare	shed: IIII Deed Box	ok&Page:	1 IVIAP D	00KG, 490. <u>—</u>	
	TO THE PROPERTY OF THE PROPERT	1. HW4 2/	FOR 17	MILLS 1/	<u> </u>	
CA 12 c -10	al GILCHI	2185 KOAD	(S/K)	43 701	. 4 M	ILE
TIR AT 432 GILCHRIS	T RD INTO	JUSTIN LA	NE COPPE	SITE WALT	KR LANG	<u>e) </u>
TIR AT THE GILLINE	, , , , , , , , , , , , , , , , , , , ,					
<u> 76</u>						Circle:
PROPOSED USE:			0	Dack	Crawl S	
PROPOSED USE:	# Baths Bas	ement (w/wo bath)	Garage	(cita built?	Deck (si	te built?
SFD (Size x) # BedioonsModular: On frame Off frame (Sizex) # Bedro	ooms# Baths	Garage	(site built?)	Deck(s.	(c bank:
Multi-Family Dwelling No. Units	No. Bed	rooms/Unit	_	mana a da		ita built?
Multi-Family Dwelling No. Units Manufactured Home:SWD'	WTW (Size <u> 2 </u>	# Bedrooms _	S Garage	(site built?	Deck	ite pairt:
☐ Business Sq. Ft. Retail Space	Type		# Employe	es:Hours o	t Operation:	
(i) Industry So Ft	Type		# Employe	es:nours o	if Operation:	
Church Seating Capacity	# Bathrooms	Kitchen				
☐ Home Occupation (Sizex_) # Rooms	Use			Operation:	
() Accessory/Other (Sizex_) Use					
Addition to Existing Building (Size	x) Use			Closets	s in addition(_	_)yes ()no
Water Supply: County Well	(No. dwellings	_) MUST have ope	rable water beto	re final	()0	uhar
Sewage Supply: New Septic Tank (A	Aust fill out New Tank C	hecklist) () Existing	Septic Tank () County Sewer	∪ <u>()</u> ع∨د	C / NO
Property owner of this tract of land own lar	id that contains a manuf	actured home w/in five	hundred feet (50	10') of tract listed ab	ove:	:S
Structures on this tract of land: Single fam		Manufactured Hom	es <u>1 1/10</u>	】 Other (specify) _		
Required Residential Property Line Seti		mments:				
Front Minimum 35 Actual	47				_ _	
Rear	142					<u></u>
Side10	13					
Sidestreet/corner lot 20						
Nearest Building6 on same lot						
If normits are granted Lagree to conform	to all ordinances and	the laws of the State of	of North Carolin	a regulating such v	vork and the s	specifications of pl
submitted. I hereby state that the forego	oing statements are acc	curate and correct to the	ne best of my ki	nowledge. This pe	rmit is subject	to revocation if fa
information is provided on this form.						
/ X/-1.1h			1	0-4-05)	
			•			

Signature of Owner or Owner's Agent **This application expires 6 months from the initial date if no permits have been issued**

Date

LOT # 2 B+B SubDivision .55 ACRA

SCALE 1=40



OWNER NAME: MARK CURRIN

APPLICATION #: 0750018614

This application to be filled out only when applying for a new septic system. County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

expiration)		
DEVELOPMENT INF	<u>ORMATION</u>	
New single family r	esidence	
 Expansion of existir 	ng system	
 Repair to malfunction 	oning sewage disposal system	
☐ Non-residential type	e of structure	
WATER SUPPLY	****	
□ New well		
Existing well		
☐ Community well		
Public water		
□ Spring		
Are there any existing w	ells, springs, or existing waterlines on this property?	
{} yes {} no {) unknown	
SEPTIC		
{ } Accepted	ion to construct please indicate desired system type(s): can be ranked in order of preference	e, must choose one.
•	·—·	
,	{} Other	
	·	
	y the local health department upon submittal of this application if any of the following is "yes", applicant must attach supporting documentation.	apply to the property in
{_}}YES	Does the site contain any Jurisdictional Wetlands?	
{_}}YES	Does the site contain any existing Wastewater Systems?	
{_}}YES	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 _{	Are there any easements or Right of Ways on this property?	
{_}YES {NO	Does the site contain any existing water, cable, phone or underground electric lines'	?
	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service	3 .
I Have Read This Applica	ition And Certify That The Information Provided Herein Is True, Complete And Correct.	Authorized County And
State Officials Are Grant	ed Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Ap	olicable Laws And Rules.
	Solely Responsible For The Proper Identification And Labeling Of All Property Lines And	Corners And Making
The Site Accessible So Th	at A Complete Site Evaluation Can Be Performed.	
	8 ls Whi	10-4-07
PROPERTY OWNERS	S OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	DATE

FOR REGISTRATION REGISTER OF DEEDS KINGERLY B. HERGROVE HARMETT COUNTY, NC 2001 RUE 14 03:10:40 pm 8K:1829 Pg:145-147 FEE:510.00 NC REVENUE STAMP:588.00 INSTRIBETT 8:2018.4222

	Americanis Times mood stid balls			
Tax Lot No.	Parcel Identifier No.			
Verified by G	ounty on the day of			
	eming, Jr., Attorney at Law			
Brief description for the Index				
NORTH CAROLINA	SPECIAL WARRANTY DEED			
THIS DEED made this 13 day of August				
GRANTOR	I GRANTER			
CENTURA BANK	JAMES MARK CURRIN			
Post Office Box 1220	3868 Spring Hill Church Road			
Rocky Mount, North Carolina 27802	Lillington, NC 27546			
Anter in appropriate block for each party: came, address, a	und, if appropriate, character of emity, e.g. corporation or partnership,			
The designation Grantor and Grantee as used here shall include singular, plural, masculine, feminine	in shall include said parties, their heirs, successors, and assigns, and or neuter as required by context.			
WITNESSETH, that the Grantor, for a valuable acknowledged, has and by these presents does grant	consideration paid by the Grantee, the receipt of which is hereby it, bargain, sell and convey unto the Grantee in fee simple, all tha			
certain lot or parcel of land situated in the City of .	Township			
	and more particularly described as follows:			
	the dedicated easement as shown on a "survey for B and B			
	LS dated 9-19-96, and recorded in Plat Cabinet F, Slide 682-			
D, Harrnett County Registry.				

N.C. Har Aspec, Perm No. 6 @ 1911

Less and except Lot #1.

HARNETT COUNTY TAX 10 # OF 9575 - COS 1 - CO , OS OH, DE, CO OH, D



