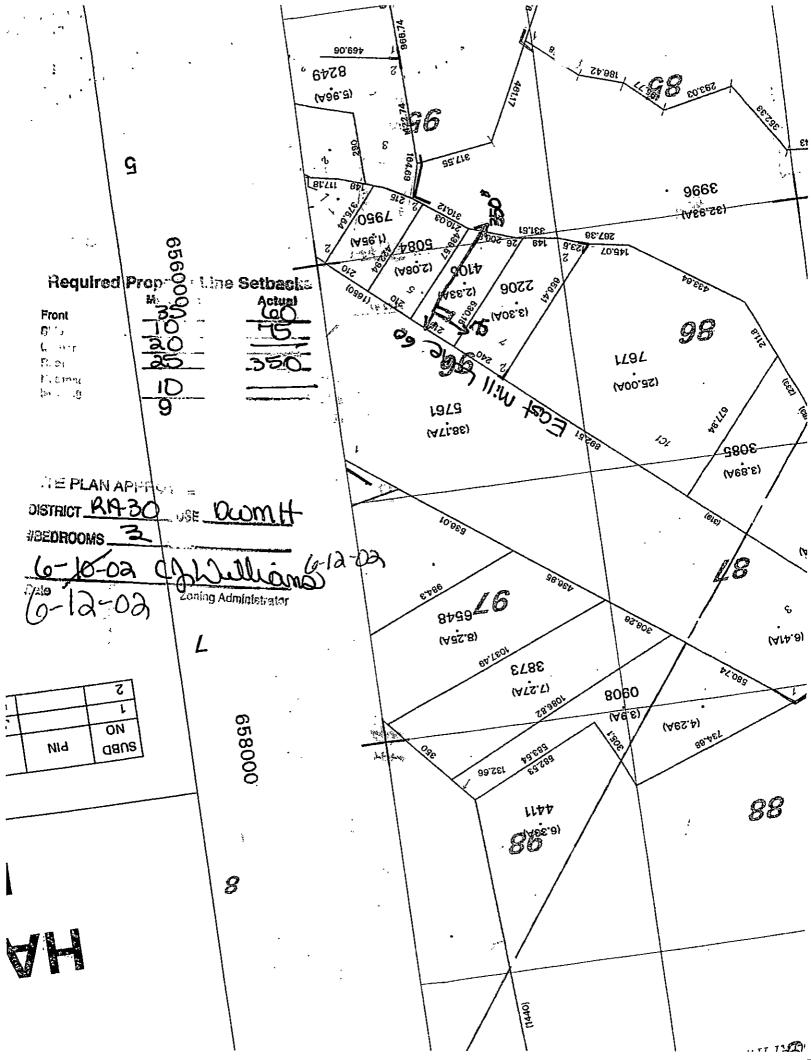
### COUNTY OF HARNETT LAND USE APPLICATION

## **Central Permitting**

102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759 Fax: (910) 893-2793

LANDOWNER: STEVISON PAMELA Mailing Address: 68 GROVE ST			
City: YOUNGSVILLE State: CONN Zip: Phone #:			
APPLICANT: LAMBRET KAREN Mailing Address: 2177 MATT MILL POND ROAD			
City: <u>ANGIER</u> State: <u>NC Zip: 27501</u> Phone #: <u>919-639-6743</u>			
PROPERTY LOCATION: SR #: NC 42 SR Name: OFF NC 42			
Parcel: <u>05-0615-0037-08</u> PIN: <u>0615-96-4105</u>			
Zoning: RA 30 CRITERIA Subdivision: EAST MILL Lot #: 6 Lot Size: 2.33 AC			
Flood Plain: X Panel: 5 Watershed: NA - Deed Book/Page: 1195/0769 Plat Book/Page: TAX MAP			
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: <u>HWY 401 N TURN LEFT ON CHRISTAIN LIGHT ROAD GO TO HWY 42 TURN LEFT OF</u>			
CHRISTIAN LIGHT ROAD EAST MILL S/D ON THE RIGHT (PASS BALL ROAD EAST MILL ON THE RIGHT )			
PROPOSED USE:			
Sg. Family Dwelling (Sizex) # of Bedrooms: # Baths: Basement (w/wo bath): Garage: Deck:			
Multi-Family Dwelling No. Units: No. Bedrooms/Unit:			
Manufactured Home (Size 28, 4 of Bedrooms: 3 Garage: NA Deck: NA			
Comments: $\underline{\hspace{1cm}}$			
Number of persons per household: Number of Employees at business:			
Business: Sq. Ft. Retail Space: Type;			
☐ Industry: Sq. Ft.: Type:			
Home Occupation: (Sizex) # Rooms: Use:			
Accessory Building: (Sizex) Use:			
Addition to Existing Building: (Sizex) Use:			
Other:			
Water Supply: ⊠ County □ Well □ (# dwellings:) □ Other			
Sewage Supply: New Septic Tank			
Erosion & Sedimentation Control Plan Required?			
Structures on this tract of land: Single family dwellings: Manufactured homes: 1 PROPOSED DWMH RA 30 CRITERIA Other (specify):			
<u> </u>			
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			
Front 35 60 Side 10 75			
Nearest Building 10 NA			
Rear         25         350           Corner         20         NA			
TA TAX			
· · · · · · · · · · · · · · · · · · ·			
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.			
Maren Lambert 6-12-02			
Signature of Applicant Date			

\*\*This application expires 6 months from the date issued if no permits have been issued\*\*



# HARNETT C NTY HEALTH DEPARTMENT)

TERAR

IMPROVEMENT	PERMIT	, 11040
Be it ordained by the Harnett County Board of Health as follows: Stion of any building at which a septic tank system is to be used for disposifrom the Harnett County Health Department."	al of sewage without first o	btaining a written permit
Name: (owner) Fame la W, Stevison	New Installation	Septic Tank
Property Location: SR#	☐ Repairs	Mitrification Line
Subdivision East mill	Lot	#
Tax ID #	t Size: 2. 3 _4	9 C .
Basement with Plumbing: Garage:		
Water Supply: Well Public Community		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal systemal approval.	em on above captioned p	property. Subject to
Type of system: Conventional Other Size of tank: Septic Tank: 900 gallons Pur		
Size of tank: Septic Tank: 400 gallons Pur	np Tank: gal	lons
Subsurface No. of exact length  Drainage Field ditches of each ditch /00 ft.	width of 3 de ditches ft. di	epth of tches 24 in.
French Drain Regulied: Linear feet		
This permit is subject to revocation if site  Signed:	4-27-97 M Eu  Environmental Heal	1.0
plans or intended use change.  Signed:		
VOID AFTER 5 YEARS 210	Place	well in of lot le from
1	arang	e system
CONV. Repair	737	lou costours

# HARNETT COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 1 8 96 . This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.
Owner or Authorized Agent Panela Stevison
Name: Telephone # _639-7555
Address: Angier NC
Property Location: SR # Road Name off NC 42
New Installation Repair Septic Tank Nitrification Lines
Subdivision Eas+ mill Lot #_6
Number of Bedrooms Proposed: Lot size: 2-3 AC
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: ft.
Type of System: Conventional Other
Tank Volume: Septic Tank 900 gallons Pump Chamber gallons
Nitrification Field Specifications
Number of fields Number of Lines per Field Length of lines 3 at 100'
Width of ditches 3 ft. Depth of ditches 244030 inches
French Drain: Linear feet required Depth of gravel
No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the improvement permit and that a valid operations permit has been issued.
Authorized Agent for Harnett County Health Department
Name: fyl Euly Date: 4-27-97

(Revised 2/96)CNSTRCT.WPD

The home I was purchasing Fell Huru. D'ue purchased a 28 x 400 Os that going to change any thing? Do I have to revise the plot map? Ots still a 3 Bedroom, 2 Back 25,00 nevision fee ASAP! test to be done Genny Manhart is the inspector Bring in a side measurment : from the property line. Ness 91