

Initial Application Date: _____

Revision

Application # C-5-5110

UNTY OF HARNETT LAND USE APPLICATION

Central Permitting

102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: Bary & Barbara Hughes Mailing Address: 3055 Old Berris Creek Rd
City: Angier State: _____ Zip: _____ Phone #: _____

APPLICANT: Bary Hughes Mailing Address: Mobile 639-6594
City: _____ State: _____ Zip: _____ Phone #: 919-669-5369

PROPERTY LOCATION: SR #: 1546 SR Name: Young Rd
Parcel: 07-0692-0036-0207 PIN: 0692-77-6632
Zoning: RA30 Subdivision: NA Lot #: 2 Lot Size: 1.289 AC
Flood Plain: X Panel: 50 Watershed: NA Deed Book/Page: 1531-824 Plat Book/Page: 2001-932

Specific
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 to Angier Take McGiver St go by School, go about 5 miles turn right on Young Rd go 1/2 mile hard on left.

PROPOSED USE:
 Sg. Family Dwelling (Size 28 x 54) # of Bedrooms 3 # Baths 2 Basement (w/wo bath) _____ Garage _____ Deck 10x12 Back 10x12 front
 Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
 Manufactured Home (Size 28 x 54) # of Bedrooms 3 Garage _____ Deck 2 Baths

- Comments: _____
 Number of persons per household _____ Type _____
 Business Sq. Ft. Retail Space _____ Type _____
 Industry Sq. Ft. _____ Use _____
 Home Occupation (Size _____ x _____) # Rooms _____ Use _____
 Accessory Building (Size _____ x _____) Use _____
 Addition to Existing Building (Size _____ x _____) Use _____
 Other _____

Water Supply: County Well (No. dwellings _____) Other _____
Sewage Supply: New Septic Tank Existing Septic Tank County Sewer Other _____

Erosion & Sedimentation Control Plan Required? YES NO
Structures on this tract of land: Single family dwellings _____ Manufactured homes _____ Other (specify) _____

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	Minimum	Actual
Front	<u>35</u>	<u>54</u>	Rear	<u>25</u>
Side	<u>10</u>	<u>50</u>	Corner	<u>20</u>
Nearest Building	<u>10</u>	<u>/</u>		

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.

Bary Hughes
Signature of Applicant

7-12-02
Date

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

IMPROVEMENT PERMIT

No 13934

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) Dany Hughes

New Installation

Septic Tank

Property Location: SR# 1546 Young Rd

Repairs

Nitrification Line

Subdivision _____ Lot # 2

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 1.2 ACU

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50' ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other _____

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-20 in.

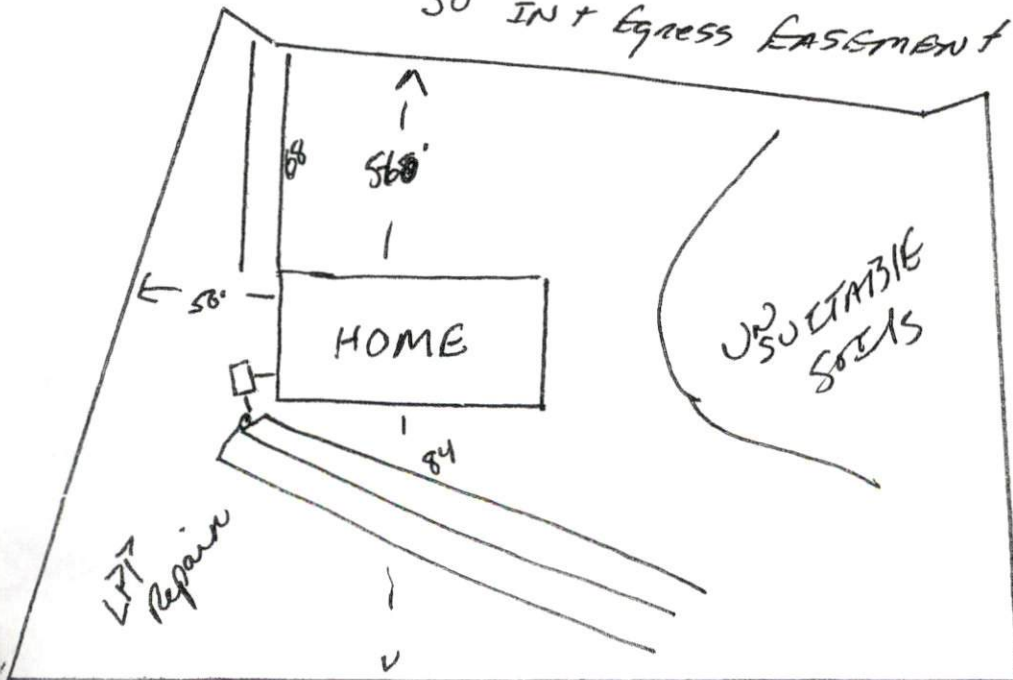
French Drain Required: — Linear feet

Date: 7-22-02

This permit is subject to revocation if site plans or intended use change.

Signed: James E. Marshall
Environmental Health Specialist

30' IN + Egress EASEMENT



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 # 13934. 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.

Name Gary Hogles Telephone # 639-6594

Address 3055 OLD BULES CREEK RD ANGIER N.C.

Property Location SR# 1546 Road Name Young

Subdivision - Lot # 2 # Bedrooms Proposed 3 Lot size 1.289

TYPE OF SYSTEM

New Installation [] Repair Septic Tank Nitrification Lines
 Conventional Other _____ [] Basement [] With Plumbing [] Without Plumbing

Water Supply: Well [] Public - Minimum Well Setback: _____ Ft.
Septic Tank 1000 Pump Chamber _____

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 3 Length of lines 100 Ft.

Width of ditches 3 ft. Depth of ditches 18-20 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.

Signature of Authorized Agent for Harnett County Jane E. Manha Date 7-22-02