FRANKLIN COUNTY HEALTH DEPARTMENT

PERMIT NUMBER:	DATE:		SIZE:
8330C CONST IMPROVE PERMIT	07.02.96	23443	

APPLICANT:	OWNER:
CHARNETSKY TOM CUSTOM HOME PO BOX 1738 WAKE FOREST NC 27588 TELEPHONE: 554-2199	WATSON DONALD 102 BRYAN BLVD HAVELOCK NC 28532

COMMENT:

LOCATION / DIRECTIONS:

FEE:	SIGNATURE OR OWNER OR AUTHORIZED AGENT:
WAKE ROYALE #2049 100.00 2565	

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

TOPO PS TEXTURE PS STRUCTURE — DEPTH —

R.HOR — SOIL.WET — AVAIL.SP — OTHER —

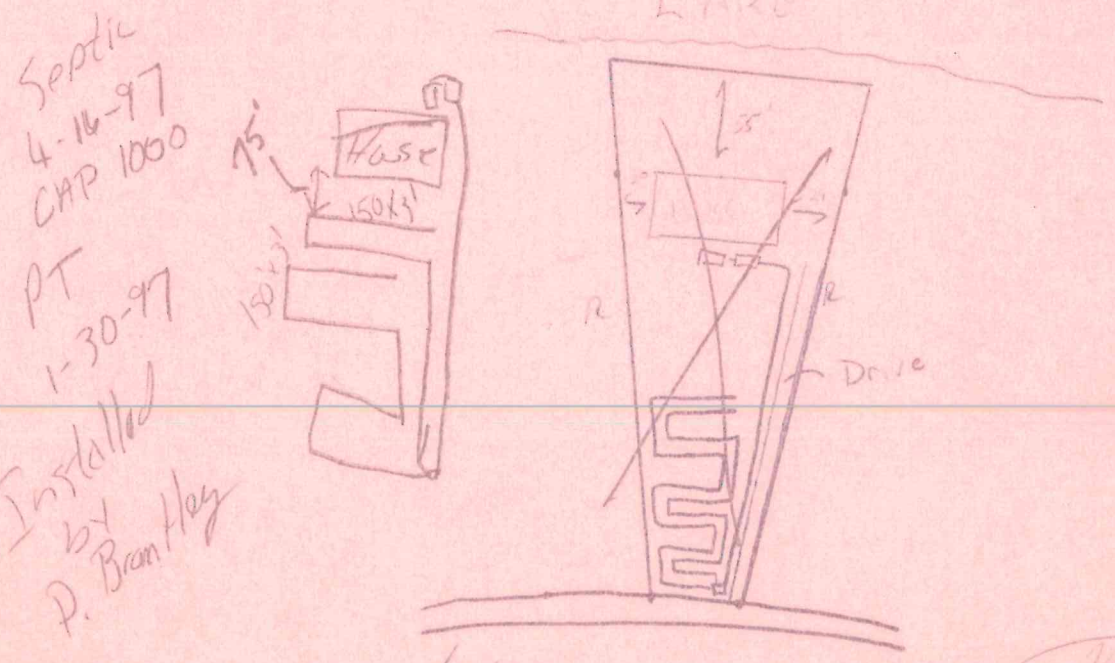
MINRL MOD/SEXP OVERALL PS LTAR .4 gal/d

#BEDRMS 3 GPD 360 gal/d DISPOSAL / TYPE.SYS C

SZ.TANK 900 SZ.CHAMB 1000 NITRIFI 3 X 30 TYPE.WAT Com

SITE.LOC — MAX TRENCH DEP — TYP.FAC STD

REMARKS: Spatter System - Stay 5' from prop't lines & building foundation.



IMPROVEMENT PERMIT DATE: 7/6/96 ENV HEALTH SPEC:

CONSTRUCTION AUTHORIZATION DATE: 7/6/96 ENV HEALTH SPEC:

OPERATION PERMIT DATE: 5/29/97 ENV HEALTH SPEC:

FRANKLIN COUNTY HEALTH DEPARTMENT

PERMIT NUMBER:	DATE:		SIZE:
8330C CONST IMPROVE PERMIT	07.02.96	23443	

APPLICANT:	OWNER:
CHARNETSKY TOM CUSTOM HOME PO BOX 1738 WAKE FOREST NC 27588 TELEPHONE: 554-2199	WATSON DONALD 102 BRYAN BLVD HAVELOCK NC 28532

COMMENT:

LOCATION / DIRECTIONS:

FEE:	SIGNATURE OR OWNER OR AUTHORIZED AGENT:
PINE ROYALE #2049 100.00 2565	

THE ABOVE SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREE WITH ALL PROVISIONS AND INFORMATION AS OUTLINED ON THE BACK SIDE OF THIS FORM

TOPO 23 TEXTURE Pr STRUCTURE — DEPTH —

R.HOR — SOIL.WET — AVAIL.SP — OTHER —

MINRL Mod/Sev OVERALL B LTAR .4 a/d

#BEDRMS 3 GPD 360 DISPOSAL — TYPE.SYS C

SZ.TANK 460 SZ.CHAMB 1000 NITRIFI 2 x 30 TYPE.WAT Com

SITE.LOC — MAX TRENCH DEP — TYP.FAC STD

REMARKS: Septic System - Stay 5' from Property Lines & building foundation.

Septic
4-16-97
CAP 1000
PT
1-30-97
Installed
by
P. Brantley

IMPROVEMENT PERMIT DATE: 7/6/96 ENV HEALTH SPEC:

CONSTRUCTION AUTHORIZATION DATE: 7/6/96 ENV HEALTH SPEC:

OPERATION PERMIT DATE: 5/29/97 ENV HEALTH SPEC:

SEPTIC PERMIT APPLICATION
Franklin County Health Department
Phone 496-8100

8330C

TxRECN#: 23443
PIN#:

SPermit#: 0
BPermit#: 7067
TMAP: LR08082049

Township: Lake Royale
Subdivision: Lake Royale
Prop.Address:

Zone: AR
Lot: 2049 Lot Size:
St.Road:

Applicant: Charnetsky, Tom, Custom Hom
Address: P.O. Box 1738
C/S/Z: Wake Forest, NC 27588
Phone: (919) 554-2199

Owner: Watson, Donald
Address:
C/S/Z:

SF/Building Permit: Y
Bedroom#: 3
Commercial:
Public Sewer:
Public Water:
Type Facility:
SPermit $:100.00
Notes:

Mobile Home Permit:
Bath#: 3.0
Industrial:
Town:

Est.Daily Waste Flow:
Date: 06/19/96 Rec#: 2565

ZONING PERMIT
Department of Planning & Development

Use of Property: SFD
Zoning District: AR
Setback Required: Front:30 Rear: 25 Side: 10

_____
Zoning Adminstrator

I certify that all the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized County representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

_____ _____
Signature of Owner/Authorized Agent Date

Call the Health Department (496-8100) between 8:00 AM and 9:00 AM on Monday-Friday to schedule an appointment with an environmental health specialist to evaluate your lot. He/she will show you where to locate the well and septic system, in relation to the desired dwelling location and any property lines. If approved, an improvements permit will be issued. After the septic tank has been installed and approved, the Sanitarian will issue a certification of completion.

PER005B

SEPTIC PERMIT APPLICATION
Franklin County Health Department
Phone 496-8100

8275C

TxRECN#: 23443
PIN#:

SPermit#: 0
BPermit#: 7067
TMAP: LR08082049

Township: Lake Royale
Subdivision: Lake Royale
Prop.Address:

Zone: AR
Lot: 2049 Lot Size:
St.Road:

Applicant: Watson, Donald
Address: 102 Bryan Blvd
C/S/Z: Havelock, NC 28532
Phone: (919) 554-2199
SF/Building Permit: Y
Bedroom#: 3
Commercial:
Public Sewer:
Public Water:
Type Facility:
SPermit $:100.00
Notes:

Owner: Watson, Donald
Address:
C/S/Z:

Mobile Home Permit:
Bath#: 3.0
Industrial:
Town:

Est.Daily Waste Flow:
Date: 06/19/96 Rec#: 2565

ZONING PERMIT
Department of Planning & Development

Use of Property: SFD
Zoning District: AR
Setback Required: Front:30 Rear: 25 Side: 10

James Moody

Zoning Adminstrator

I certify that all the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized County representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Tim Chaney 6-18-96

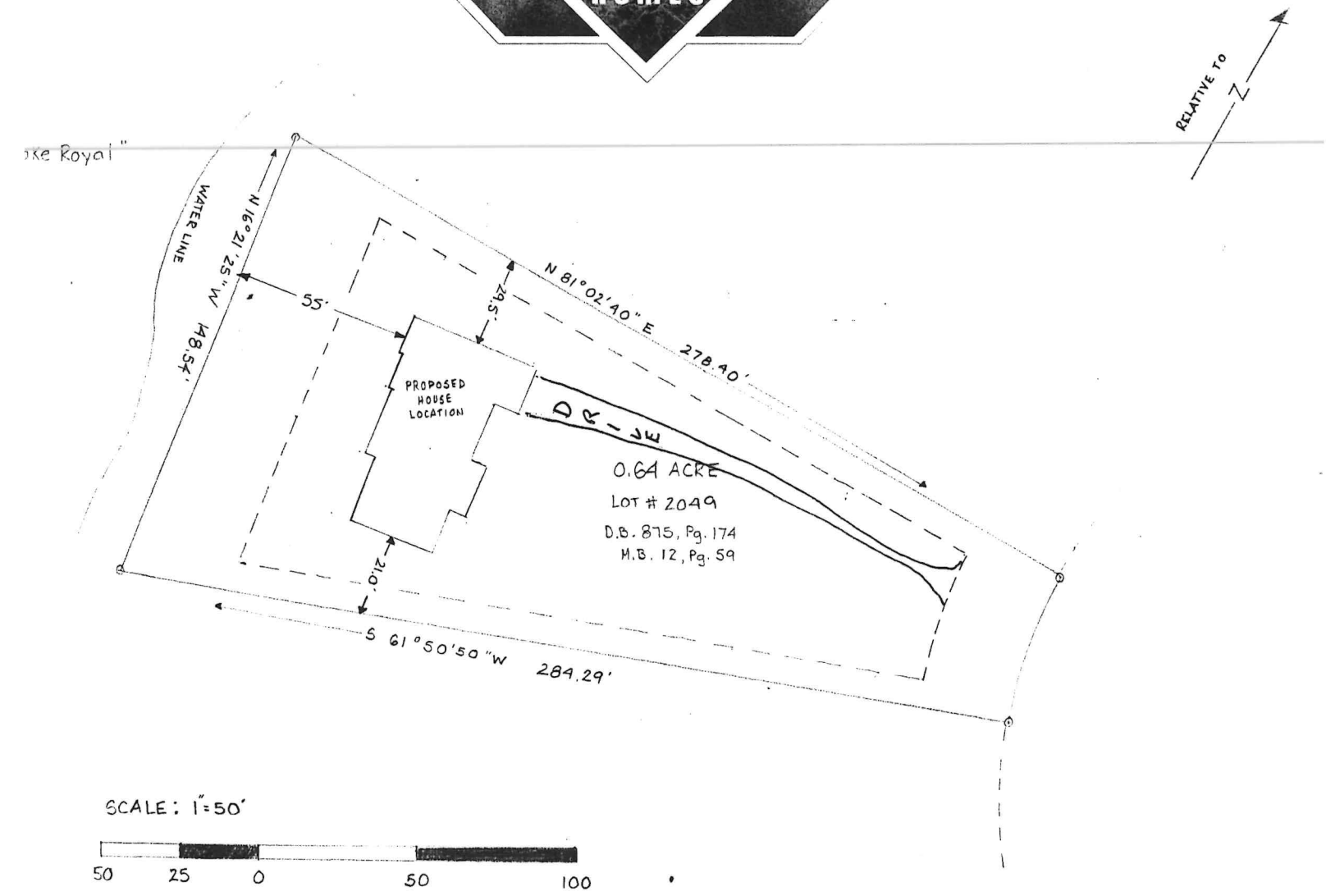
Signature of Owner/Authorized Agent Date

Call the Health Department (496-8100) between 8:00 AM and 9:00 AM on Monday-Friday to schedule an appointment with an environmental health specialist to evaluate your lot. He/she will show you where to locate the well and septic system, in relation to the desired dwelling location and any property lines. If approved, an improvements permit will be issued. After the septic tank has been installed and approved, the Sanitarian will issue a certification of completion.

5/21/97

PER095B

CHARNETZKY CUSTOM HOMES



I, Charles M. Davis, Jr., certify that under my direction and supervision, this map was drawn from an actual field survey, that the ratio of precision or accuracy is 1:10,000, that this map was prepared in accordance with The NC Administrative Code, Title 21, Chapter 56, Section 1600 as amended, that this map is of a survey such as the recombination of existing parcels, a court-ordered survey, an existing parcel(s) of land or other exception to the definition of subdivision, (deed description recorded in Deed Book 875, Page 174, see also references on map). Witness my original signature, registration number, and seal this 14th day of June, 1996.

R.L.S.-3270 Charles M. Davis Jr.

North Carolina Franklin County

Notary Public of the County and State aforesaid, certify that Charles M. Davis, Jr., a Registered Land Surveyor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal this 14th day of June, 1996. My Commission Expires: 12/01/98

Notary Public Martha F. Davis

NORTH CAROLINA REGISTERED SEAL L-3270 CHARLES M. DAVIS, JR. SURVEYOR

MARTHA F. DAVIS NOTARY PUBLIC FRANKLIN COUNTY, N.C.

Survey for

TOM CHARNETZKY & SHERRIE CHARNETZKY

Cypress Creek Township

Franklin County, North Carolina

Scale 1" = 50' June 14, 1996

SYMBOL LEGEND

- Existing Iron Pipe(EIP)
- Existing PK Nail(EPK)
- Existing RR Spike(ERS)
- Ex. Conc. Mon.(ECM)
- SO Penny Nail
- Existing Axle
- Power Pole
- Electric Lines
- Center Line
- R/W Right of Way
- Mon Hole
- New Iron Pipe(NIP)
- New PK Nail(NPK)
- New RR Spike(NRS)
- New Conc. Mon.(NCM)
- Existing Rebar
- Computed Point
- Light Pole
- Grid Monument
- Property Line
- R/W Monument
- Telephone Lines

REVISIONS

TOTAL P.02