

Chatham County Planning Department

P.O. Box 54

Pittsboro, NC 27312

Tel: (919) 542-8204

Fax: (919) 542-2698

Type of Review

Sketch

Preliminary

Final

MAJOR SUBDIVISION APPLICATION

Name of Subdivision: ROBERT NELSON WALL + WIFE JANILEE
Subdivision Applicant: _____ Subdivision Owner: _____

Name: ROBERT NELSON WALL Name: _____

Address: 64 WILLOW WAY CHAPEL HILL NC 27514 Address: _____

Phone: (W) 919 230 0729 Phone: (W) _____

Phone: (H) 919 230 0622 Fax: _____ Phone: (H) _____ Fax: _____

E-Mail _____ E-Mail _____

Township: BALDWIN Zoning: _____ P. I. N. # 9766-21-9166

Flood Map # _____ Zone: _____ Parcel # 1699

Watershed: CUS-1V PA Existing Access Road: S.R. # 1583
S.R. road name WILLOW WAY

Total Acreage: 1.61 Total # of Lots: 2 Min. Lot Size: 34,303 sq. ft.

Ph. I Acreage _____ Ph. I # of lots _____ Max. Lot Size: 35,823 sq. ft.

Ph. II Acreage _____ Ph. II # of lots _____ Avg. Lot Size: 35,063 sq. ft.

Ph. III Acreage _____ Ph. III # of lots _____

Type of new road: Private/ Length N/A Public/ Length N/A

Road Surface: paved gravel
Water System: individual wells community wells public system name _____
Sewer System: septic systems community system public system name _____

List other facilities: commercial, recreation, etc., and the approximate acreage or square footage: _____

R. Nelson Wall Date 7/17/06 Same Date _____
Signature of Applicant Signature of Owner

For Office Use Only:
Notes: _____

Approved by County Commissioners: Sketch _____
Preliminary _____
Final _____

Payment: Date 1/1 Amount: \$ _____

ADJACENT LAND OWNERS (Property owners across a road, easement, or waterway are considered adjacent land owners):

Legal notices are mailed to these owners, please type or write neatly, and include zip codes.

1. JAMES E. DIXON 94 PHATHAM DR. CHAPEL HILL NC. 27516	11.
2. BEOLAH & WILLIAM HAERNE TRUSTEES 114 OAK ST. CARY NC 27510	12.
3. BAYBAKA H. THOMASON 368 WHITE OAK TRAIL CHAPEL HILL NC. 27516	13.
4. JEFFREY NELSON WALL 64 F WILLOW WAY CHAPEL HILL NC 27516	14.
5. MICHELE S. PAGNOTTA 64 W WILLOW WAY CHAPEL HILL NC 27516	15.
6. CHRISTOPHER DOLAN 126 JUSTICE ST CHAPEL HILL NC 27514	16.
7.	17.
8.	18.
9.	19.
10.	20.

VARIANCE REQUEST APPLICATION

(1) Landowner Information: (2) Applicant Information:
Name ROBERT NELSON WALL Name ROBERT NELSON WALL
Address 64 WILLOW WAY Address 64 WILLOW WAY
CHAPEL HILL, N.C. 27516 CHAPEL HILL, N.C. 27516
Phone No. (H) (919) 928-0062 Phone No. (H) (919) 928-0062
(W) (919) 630-0729 (W) (919) 630-0729

(3) Property Identification:
S.R. Name (PRIVATE) WILLOW WAY P.I.N. # 9766-21-8166
S.R. Number N/A Deed Book 485 Page 903
Township BALDWIN Plat Book 97 Page 275
Acreage 1.61 Zoning District _____

(4) Directions to Property: US15-501 NORTH OF PITTSBORO TAKE
LEFT ON MARNE CHAPEL ROAD TAKE LEFT ON
DOLLAR ROAD AND RIGHT ON WILLOW WAY PROX. 1/2 ON RIGHT

(5) Text of Ordinance to be varied: Subdivision Regulation (64 H & I Willow Way)
Section 6.4.6.1 Page 50-51
Language REQUEST FOR LOT SIZE TO BE LESS
THAN 7000 SF

(6) Reasons for the requested variance: In the space below and on additional paper if needed,
describe the reasons for the request and why you think it is justified.
THE DIVISION INTO TOWNHOUSE LOTS WILL MORE CLOSELY STRUCTURE
THE PROPERTY TO MAKE A PRACTICABLE USE FOR PRIVATE
OWNERSHIP AND THE COUNTY TAX BASE AND PROVIDE MORE
REASONABLE USE OF THE LAND SINCE THE STRUCTURE WAS

(7) Attach the following: BUILT FOR TOWNHOUSE USE.
 Written description of property from deed or survey
 Map of property at a scale of not less than 1 inch equals 400 feet
 List of names and addresses of current adjoining property owners (use form on back)

I hereby certify that I am making application for the landowner or myself and that the information provided is complete and the statements given are true to the best of my knowledge.

B. Nelson Wall
Signature

8/7/00
Date

Owner/Authorized Agent

The following must be signed by the owner if person other than the owner is making this application.

I hereby certify that _____ is an authorized agent for said property and is an authorized agent for said property and is permitted by me to file this application.

Vernon Wayne Johnson, PE
6900 Hickory Drive
Raleigh, N. C. 27603

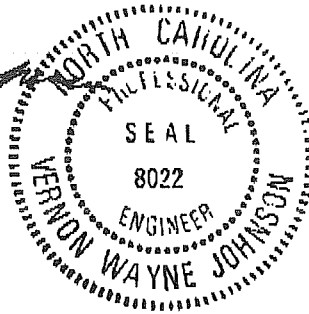
SUBJECT: Townhouses At 64H and 64I Willow Way, Chapel Hill, N. C. 27516

TO: WHOM IT MAY CONCERN

I certify that the dwelling structures constructed at the above address was constructed as townhouse units for individual residences and that the party wall is constructed as a fire rated dividing wall.

Vernon Wayne Johnson
Vernon Wayne Johnson

6-8-06



64-H Willow Way
911 ADDRESS

Nelson Wall
NAME / SUBDIVISION & LOT #

CHATHAM COUNTY HEALTH DEPARTMENT
SEWAGE DISPOSAL OPERATIONS PERMIT

Date 6-26-06 Improvements Permit No. _____
Owner Nelson Wall
Conditions Revise Operation Permit

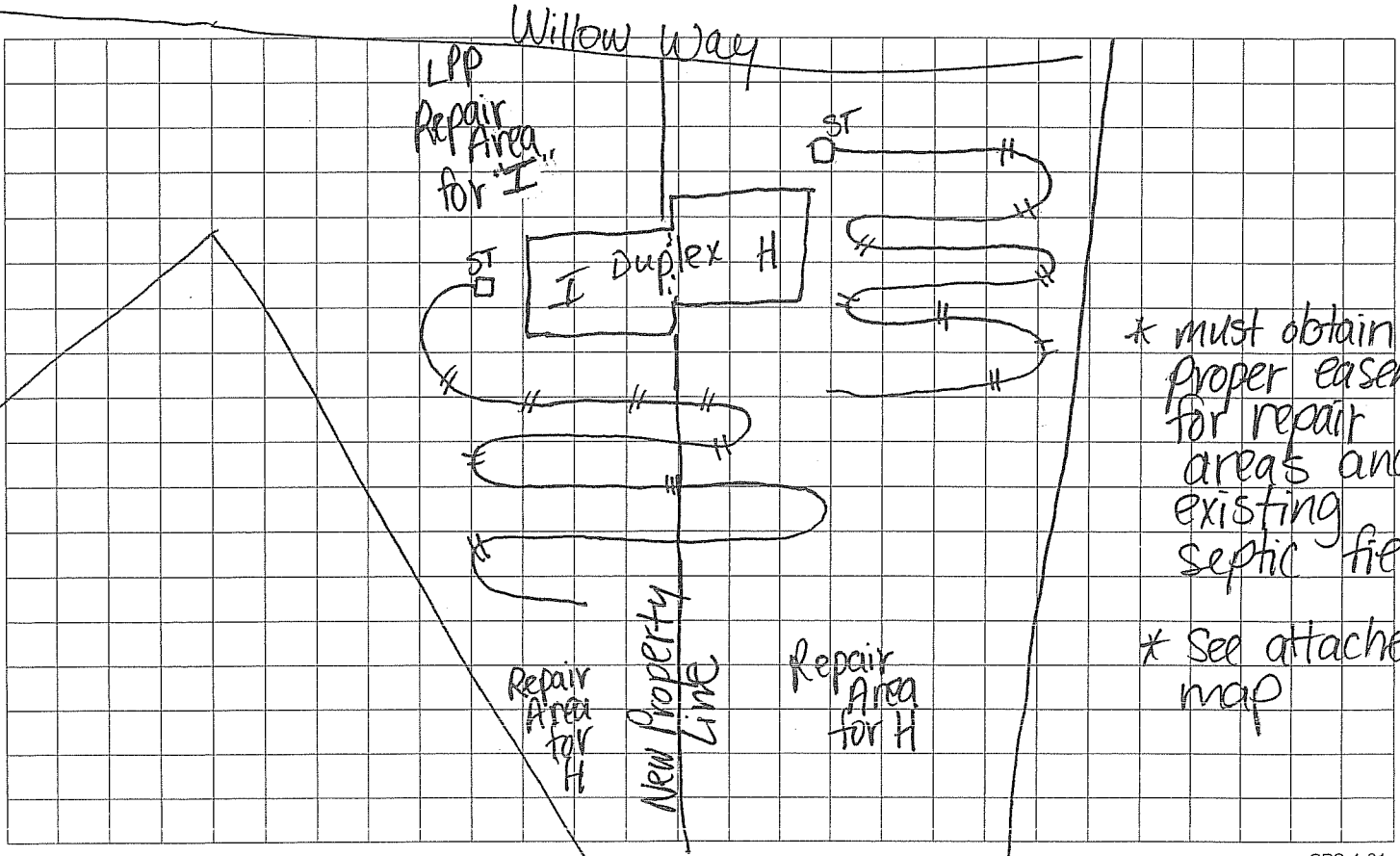
This permit authorizes the owner to operate the sewage disposal system in accordance with the state and local rules. The department does recommend that septic tanks be pumped out every 3 to 5 years, and filters be cleaned every 2 to 3 years. In the event of a malfunction contact this office.

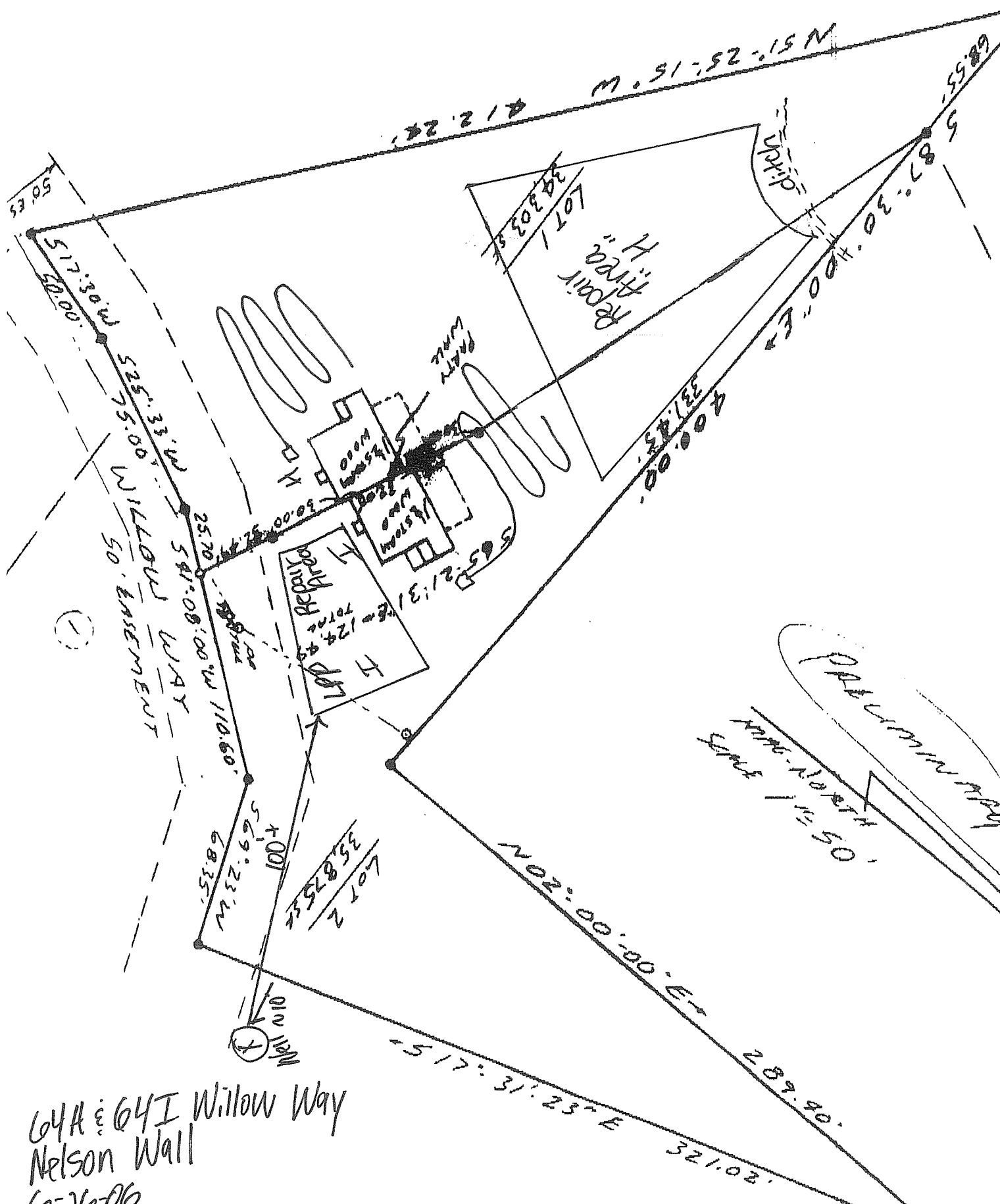
This certifies that the system has been installed in compliance with applicable NC General Statutes and Rules for Sewage Treatment and Disposal and all conditions of the Improvements Permit and Construction Authorization.

SYSTEMS CLASSIFIED AS TYPE IV, V, or VI, REQUIRE SYSTEM MANAGEMENT BY A STATE-CERTIFIED OPERATOR. OPERATION PERMIT HOLDERS ARE RESPONSIBLE FOR NOTIFYING SUBSEQUENT OWNERS.

Seri C. Pitter R.S.
Environmental Health Specialist

Type System: I II III IV V VI Installer _____





64A & 64I Willow Way
 Nelson Wall
 6-26-06
 TD

604-I Willow Way

911 ADDRESS

Nelson Wall

NAME / SUBDIVISION & LOT #

CHATHAM COUNTY HEALTH DEPARTMENT
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Jenni C. Ritter R.S.

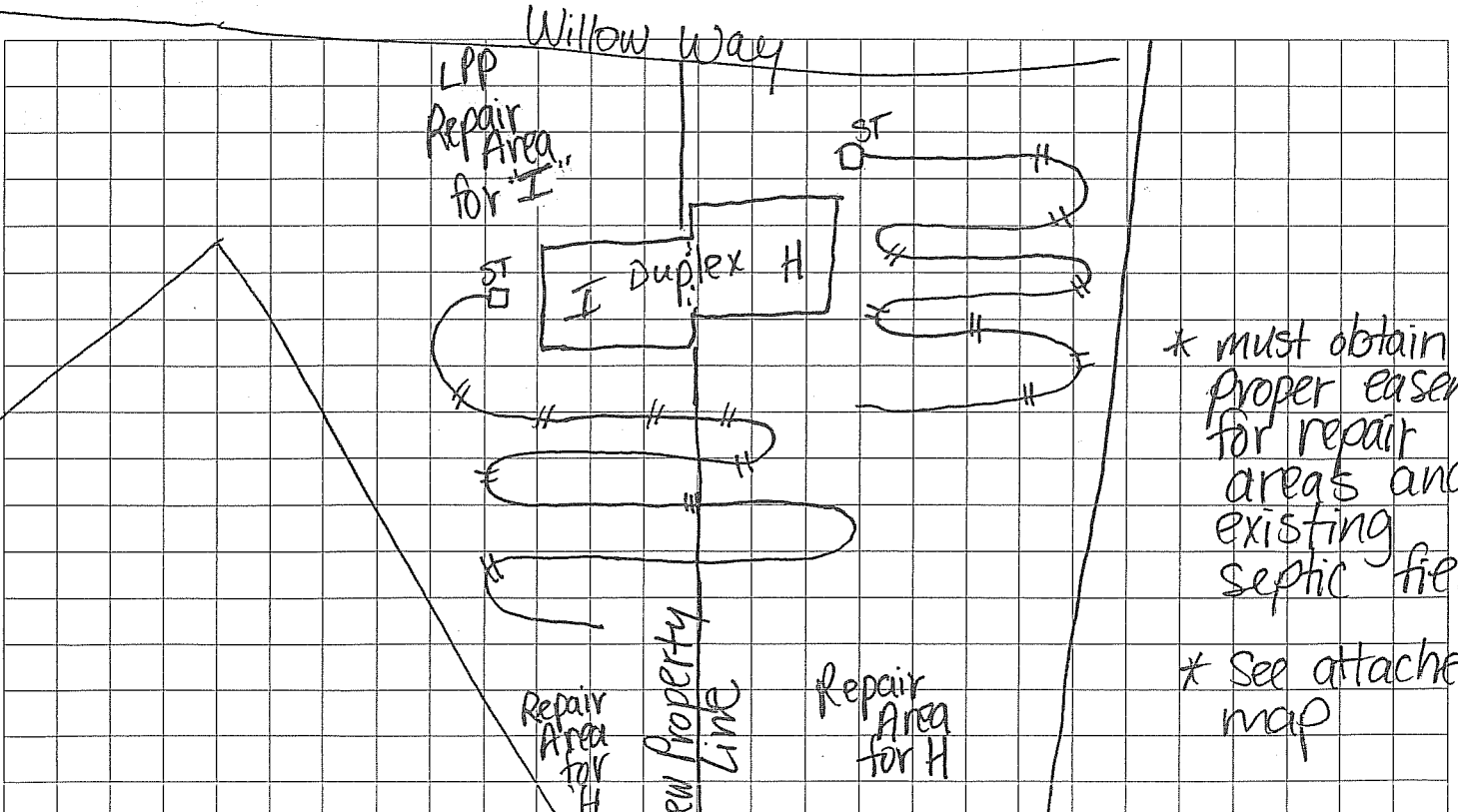
Environmental Health Specialist

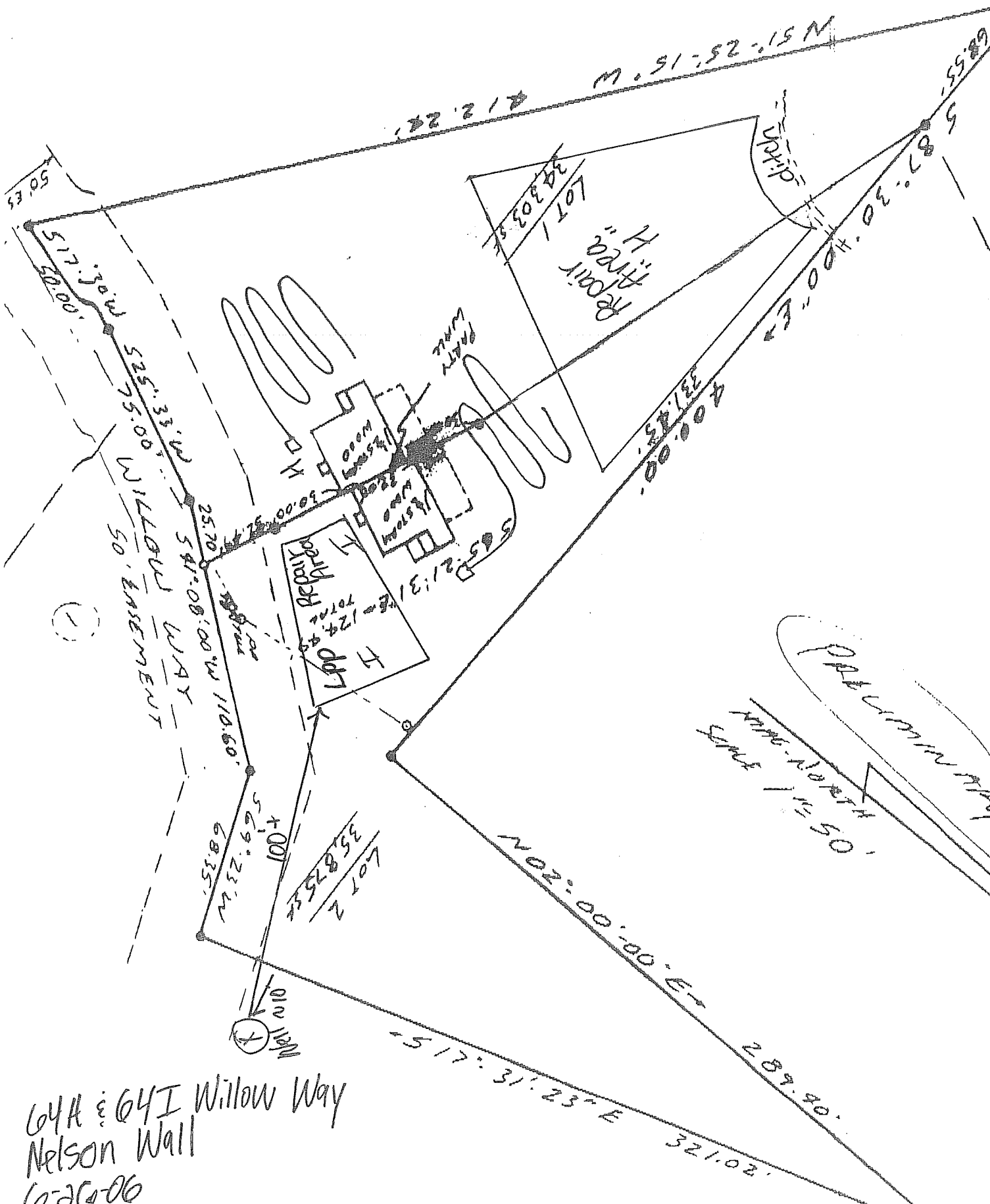
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Installer _____

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Installer _____





64A & 64I Willow Way
 Nelson Wall
 6-26-06
 JCD