	Construction Plan Application Page 2		
Type of Water System:	Individual Well 🖉 Community Well(s) 🗆 Public System 🗆		
Public Water System Name:			
Public Wastewater System Nam	e (ex. Aqua NC):		
Type of Road: Private 🗹 Lengt	h (mi.): •7 ML Public \Box Length (mi.): -0-		
••	Gravel I Width of Road Surface (feet)		
Type and Acreage of Other Facilities (ex. Recreation, Mixed-Use, Commercial, etc.):			

PERMITS/APPROVALS REQUIRED: (copies of all required permits shall be included with				
Construction Plan submittal)				
NCDOT ROAD PLAN APPROVAL	YES DATE N	[/A		
NCDOT COMMERCIAL DRIVEWAY PERMIT	YES DATE N	/A		
EROSION CONTROL PLAN APPROVAL	YES DATE N	[/A		
STORMWATER PLAN APPROVAL	YES DATE N	/A		
NCDENR (401 WATER QUALITY CERT)	YES DATE N	J/A		
U.S. ARMY CORPS OF ENGINEERS (404 STREAM	IMPACT) YES DATE N	I/A		
ROAD NAME REQUEST FORM	YES DATE N	J/A		
COUNTY PUBLIC WATER APPROVAL	YES DATE N	N/A		
STATE PUBLIC WATER APPROVAL (NCDENR)	YES DATE	N/A		
NCDENR DWQ (WASTE WATER TREATMENT PLA	ANT) YES DATE	N/A		
SOIL SCIENTIST REPORT	YES DATE	N/A		
OTHER:				

Include one (1) paper copy and (1) electronic copy of all items above (see Digital Document Requirements) and 10 paper copies of Construction Plan (scale not to be more than 200 feet to 1 inch)

124 Schrs	9	/3/19		
Signature of Property Owner/Applicant				
	Date			
For Staff Use Only	PL			
Date Received	By			
Date Review Completed	Date Applicant Contacted			
TRC Meeting Date:	Construction Plan Approval Date:			

For Questions, Contact Kimberly Tyson, Subdivision Administrator (Kimberly.Tyson@chathamnc.org) or (919) 542-8283

Chatham County Planning Department 80-A East Street P.O. Box 54, Pittsboro, NC 27312-0054 Phone: 919-542-8204

The server and the server	
MAJOR SUBDIVISION	- CONSTRUCTION PLAN
Subdivision Name: FERN CREEK	
Property Owner/Applicant:	Surveyor / Engineer:
Name: DAVIO JOHNSON	Name: MR SAMIR BAHHO
Address: 544 FERN CREEK TRAIL	Company Name: CIUL 1 5 TRUCTURIN ENC
PITTSBURU, NC 27312	Address: 4612 KARAN DR
Phone: (W)	RAUGIGHT, IVC 27606
(H) 919-545-5625	Phone: (W) <u>919-851-1642</u>
(C) 919-619-1957	(C) 919-621-0628
Fax:	Fax:
Email: DCJSMI @ EMBARQMALL.COM	Email:
Parcel # (AKPAR): <u></u> P.I.N. #	Zoning District:
Flood Map # Zone:	Watershed District:
Existing Access Road (S. R. # and name):	
Phased Development/Development Schedule? YES 🗆	NO 🖉 Phases #
Total Acreage Total # of Lots	Min. Lot Size (Acres)
Max. Lot Size <u>5,18</u> Avg. Lot Size <u>5</u> .	0 # Exempt Lots (over 10 ac.)
Please attached a <u>DETAILED</u> Phasing Schedule or Deve Lots or More).	lopment Schedule (for subdivisions consisting of 50
Mixed-Use YES D NO 🖉 Multi-Family	v (Townhomes, Apts., etc.) YES ロ NO ダ
Proposed Number of Lots: Residential	Commercial Other
If Other, Specify (i.e. recreation)	
Are there historical structures located on the property to fences, chimneys, structures. Yes No lf yes, to and date and type of contact, i.e. on-site visit, telephone. Association:	ype of structure(s)
Association: Type of Wastewater Disposal: Individual Septic 🗆	Community Septic 🗆 Public System 🗆

CHATHAM COUNTY

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