ROCK HILL OFFICE:
York County Office Complex
1070 Heckle Blvd., A-5
Rock Hill, S.C. 29730
Phone: 803-327-9079
S.C. WATS 800-922-7271

BUILDING PERMIT APPLICATION

York County, S. C.

Complete

D-1

YORK OFFICE:
Congress Street
P.O. Box 725
York, S.C. 29745
Phone: 803-684-8503

PERMIT # 49046

JOB ADDRESS 3338 WILLOWOOD DR ROCK HILL SC

1 LEGAL DESCR.	LOT NO. 6	BLK	TRACT ACREAGE	SUB-DIVISION WILLOWWOOD	HIGHWAY NO.

2 OWNER JACKIE & SHIRLEY LEAR — MAIL ADDRESS 2849 LESSLIE DALE RD — ZIP ROCK HILL SC — PHONE 324-4937

3 CONTRACTOR SAME AS OWNER — MAIL ADDRESS — PHONE — LICENSE NO. NA

4 ARCHITECT OR ENGINEER NA — MAIL ADDRESS — PHONE — LICENSE NO.

5 TAX DISTRICT	TAX MAP BLOCK NO. 750-33	SCHOOL DIST. 3	

6 USE OF BLDG. ☒ SINGLE FAMILY RESIDENTIAL ☐ DUPLEX ☐ APT. ☐ COMMERCIAL ☐ INST. ☐ WAREHOUSE

7 ☐ MANUFACTURING ☐ UTILITY ☐ OTHER DESCRIBE:

8 CLASS OF WORK ☒ NEW ☐ ADDITION ☐ ALTERATION ☐ REPAIR ☐ MOVE ☐ DEMOLISH

9 BRIEF DESCRIPTION SINGLE FAMILY DWELLING RESIDENTIAL

10 TYPE OF CONST. INTERIOR ☒ FRAME ☐ METAL ☐ WOOD ☐ OTHER EXPLAIN: TYPE VI UNPROTECTED

11 TYPE OF EXTERIOR ☐ BRICK ☐ BLOCK ☐ STONE ☒ BRICK VENEER ☒ STUCCO ☒ METAL ☐ WOOD

12 SQ. FT. 2213	VALUATION OF WORK $73,967.00		PERMIT FEE $208.00	F/P NOT BUILT NB 1-30-91	
13 ESTIMATED DATE OF COMPLETION 3-1-91	POWER COMPANY DUKE POWER		NB Y.M. F/P CLEARANCE 2-1-91		
14 GENERAL INFORMATION NO. OF STORIES 1	NO. OF BEDROOMS 3	NO. OF BATHS 2	FIREPLACES 1	GARAGE 1	CARPORT
TYPE OF HEAT GAS	FUEL	CENTRAL AIR	NEED FINAL EXAMX APPROVAL ON SEPTIC TANK BEFORE ISSUING CO		

ALL WORK TO COMPLY WITH THE 1988 STANDARD BUILDING CODE, 1989 REVISIONS.
1990 NATIONAL ELECTRICAL CODE

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 1 YEAR AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

FIRE ZONE	USE ZONE	FIRE SPRINKLER REQ: YES NO
NO. OF DWELLING UNITS	OFF STREET PARKING SPACES COVERED	UNCOVERED

SPECIAL APPROVALS	REQUIRED	APP	NOT REQUIRED
ZONING	XX	XX	
HEALTH DEPT.	XX	✓	
FIRE DEPT.			
SOIL REPORT			
OTHER: SPECIFY			

NB. APP GAS TEST 4-18-91

NOTICE TO OWNER OR POSSESSOR

Pursuant to S.C. Code Sec. 15-3-640 you have the right to contract for a guarantee of the structure being free from defective or unsafe conditions beyond thirteen years after substantial completion of the improvement for which the permit is issued.

APP. GARAGE SLAB 12-13-90 JOK

INSPECTIONS GIVE DATE	APPROVED	DISAPPROVED	DATE
FOUNDATION	NB		11-27-90
FRAMING	NB		1-22-91
R. ELECTRIC	NB *		1-22-91
R. PLUMBING	NB		1-22-91
TEMP. POWER	NB		4-18-91
C. O.		NB 4-18-91	10-9-91

Jackie Lear — 11-21-90 BC — WFC

SIGNATURE OF OWNER OR CONTRACTOR — DATE — ISSUED BY

* CHECK FOR GAURD PLATES IN AREA OF SERVICE EQUIPMENT BOTTOM PLATE

FIRE PLACE NOT BUILT 1-22-91

Complete 10-9-91

① SUCTION IN HALLWAY

② GAS WATER HEATER IN STORAGE [redacted] OF UNCONFINED SPACE.

YORK COUNTY ZONING RESIDENTIAL COMPLIANCE PERMIT

A. TYPE OF COMPLIANCE PERMIT:
✓ PERMANENT ____ TEMPORARY

B. OWNER NAME Lear
C. TAX MAP# 750-33
D. Permit #_____

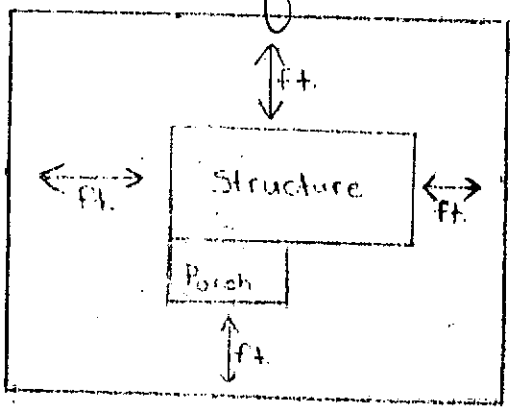
E. CLASS OF WORK:
✓ SINGLE FAMILY DWELLING
____ MOBILE HOME
____ MODULAR HOME
____ STORAGE BLDG.
____ DETACHED GARAGE
____ ATTACHED GARAGE
____ BLDG. ADDITION_____
____ SWIMMING POOL
____ AGRICULTURAL BLDG.

_____ SQUARE FEET

F. ZONING CLASSIFICATION RDI

G. SET BACK REQUIREMENTS

REAR PROPERTY LINE
25ft



LEFT SIDE PROPERTY LINE
10ft

RIGHT SIDE PROPERTY LINE
10ft

ROAD RIGHT OF WAY
25ft

H. OTHER STRUCTURES ON PROPERTY None

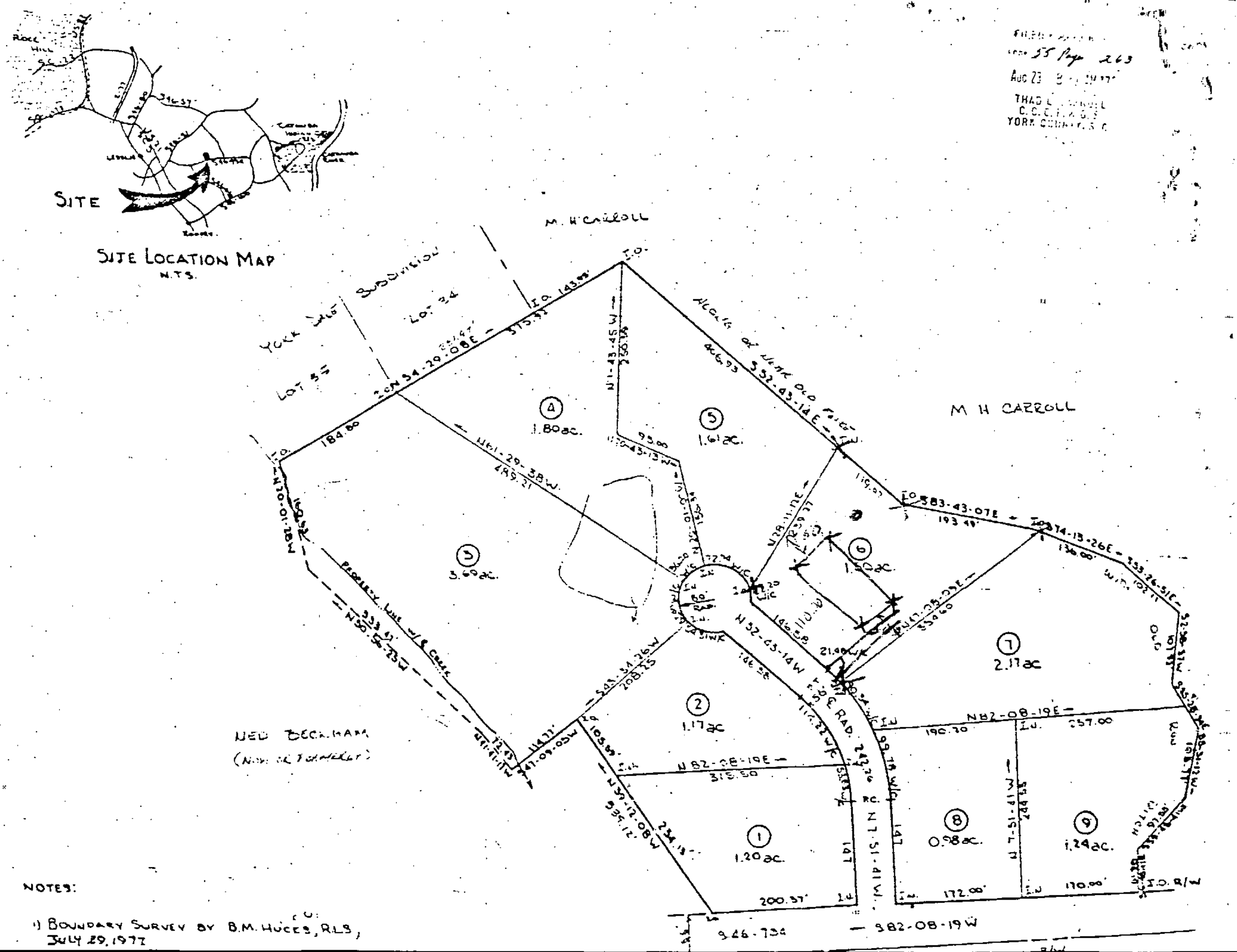
I. DISTANCE BETWEEN MAIN STRUCTURES N/A

APPLICANT ACKNOWLEDGEMENT: I DO ACKNOWLEDGE THAT THE ABOVE INFORMATION IS TRUE, AND DO AGREE TO COMPLY WITH ALL REQUIREMENTS OF THE YORK COUNTY ZONING AND DEVELOPMENT STANDARDS ORDINANCE.

SIGNATURE: [signature] DATE: _____ TELEPHUNE: 384-3040

ZONING OFFICIAL Cari S-Moore DATE: 9/24/90

FILED
55 Pg 263
Aug 23 1977
THAD L.
C. C. C.
YORK COUNTY, S.C.



SITE
SITE LOCATION MAP
N.T.S.
M. H. CARROLL
M H CARROLL
YORK SUBDIVISION
LOT 54
LOT 55
NED BECKHAM
(NOW OR FORMERLY)
ALONG OR NEAR OLD FENCE
PROPERTY LINE W/ & CREEK
OLD ROAD
1 1.20ac.
2 1.17ac.
3 3.69ac.
4 1.80ac.
5 1.61ac.
6 1.50ac.
7 2.17ac.
8 0.98ac.
9 1.24ac.
N 54-29-08 E - 515.33
N 61-29-38 W 299.21
S 52-43-14 E 466.93
N 1-43-45 W 256.36
S 83-43-07 E 193.49
S 74-13-26 E 136.00
N 82-08-19 E 257.00
N 82-08-19 E 315.50
N 7-51-41 W 244.55
N 32-43-14 W 146.58
N 7-51-41 W
S 82-08-19 W
N 39-12-08 W 539.12
S 45-34-26 W 208.25
N 70-01-28 W
N 50-56-23 W 333.41
I.O. R/W

NOTES:

1) BOUNDARY SURVEY BY B.M. HUCKS, RLS, JULY 29, 1977

360

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
PERMIT TO CONSTRUCT - CERTIFICATE OF FINAL APPROVAL
INDIVIDUAL SEWAGE TREATMENT AND DISPOSAL SYSTEM

Permit No. 14764 Type Facility 3 Bedroom House System Category 360

Name Shirley & Jackie Lear Mailing Address 2849 Sosslidale Rd. RH. SC. 29739

Subdevelopment Willowood Street Willow Pond Rd Block ____ Lot 6 Type Water Supply Private

SYSTEM SPECIFICATIONS

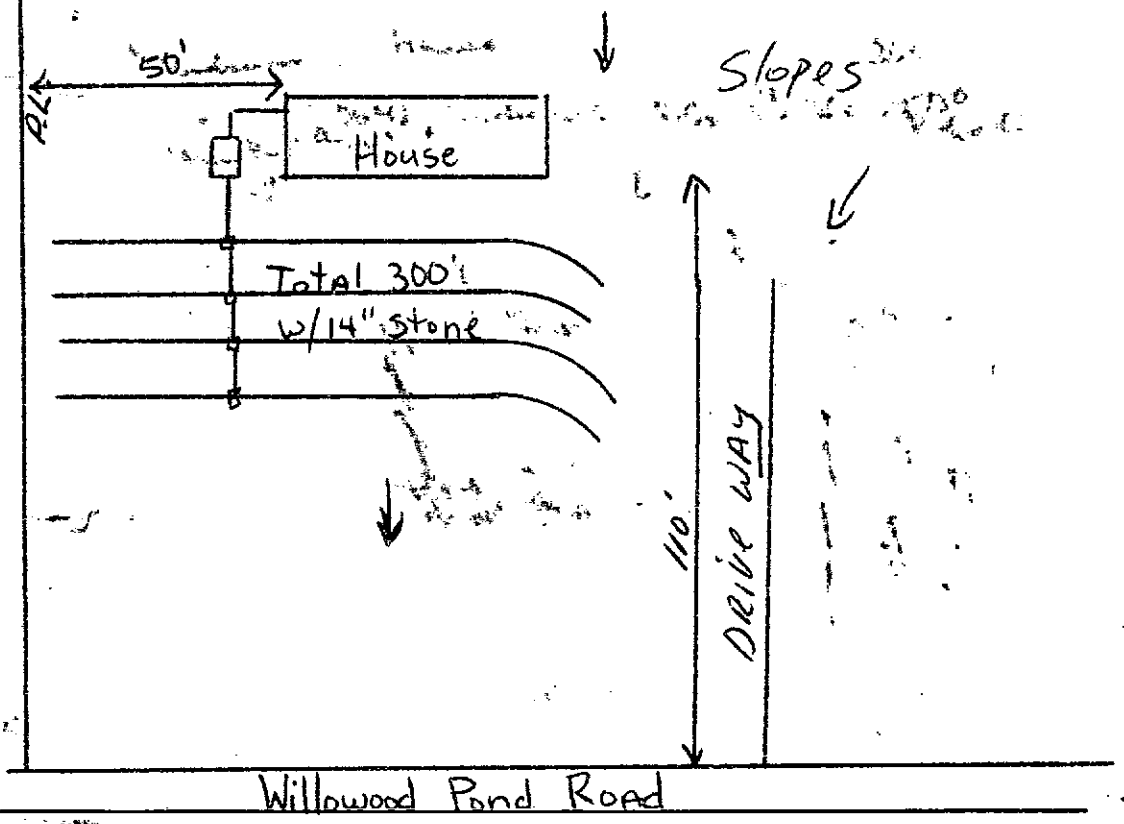
Max. Est. Daily Flow 360 gpd
Loading Rate 4
Tank Size(s) 1000 gal

Trenches: Length 300'
Width 3'
Max. Depth 3'
Stone Depth 14"
Min. Pump Capacity NA gpm
at ____ ft. of Head

SPECIAL INSTRUCTIONS/CONDITIONS

Keep on Contour
use Elbows
Keep 50'+ From well
MAX Depth 36"
Do not drive on DRain Feild

SKETCH OF RECOMMENDED INSTALLATION



ACTUAL INSTALLATION

Installer ____

Tank(s) Mfg. ____
Pipe Mfg. ____
Well Installed ____ Yes ____ No
Nearest Actual Distances from System to:
Well ____
Foundation ____
Property Line ____
Impoundment ____
Stream ____

Line No.	Grade Readings

SKETCH OF ACTUAL INSTALLATION

4,27,97

APP BY RK

THIS CERTIFICATE OF FINAL APPROVAL IN NO WAY GUARANTEES THE LIFE OF THE SYSTEM OR THAT IT WILL FUNCTION PROPERLY UNDER ANY OR ALL CONDITIONS.

Issued By: Bill Harmon Date: 9/25/90 Approved By: ____ Date: ____