Initial Application Date: JUNE 3, 70 2	Application # 3	10m2100-	
COUNTY OF HARNETT DEMOLITION APPLIC	ATION	0002	
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525	Fax: (910) 893-2793	www.harnett.org/permits	
LANDOWNER: AAWH, Inc. Mailing Address: PO	BOX 127		
City: Bunn level State: NC Zip: 28323 Contact # 910-814-2	102 Email: AB1	Digia Qyahoo.com	
APPLICANT : TEXT agreet Environmental Constants, R.C. Mailing Address: 100	E Ruffin S	t	
City: Melocune State: Mc Zip: 37302 Contact # 919-90 0-6 *Please fill out applicant information if different than landowner	0817 Email: Mb	ownpersolemaniest perce	
CONTACT NAME APPLYING IN OFFICE: TEMPENEST Environmental Consistents,	2.C.Phone # 919	563-9091	
PROPERTY LOCATION: Subdivision:	Lot #:	Lot Size:	
State Road # State Road Name:	Map Boo	k&Page:/	
Parcel:PIN: 9565-9	7-8475.1	000	
Zoning: Flood Zone: NO Watershed: Deed Book&Page: 3330/ 01	85		
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 359	24 Carry	eron, nc	
Structure(s) to be demolished & removed: Single family dwelling Manufact	ured Home	Other (specify)	
Structures (existing and/or proposed): Single family dwellings Manufacture			
	NO METAL	CANOPP	
Water Supply: (≼) County (_) Existing Well			
Sewage Supply: (X) Existing Septic Tank () County Sewer			
* If a new structure is to be replaced on this lot, please ensure that existing septic		593.10 <b>3</b> 1-704.100	
* If an existing well is on site and is to be discontinued, please contact Harnett Co	ounty Environmen	al Health for assistance.	
*Upon the issuance of the Certificate of Compliance, the Harnett County Tax Dep	artmont chall be	atified of the removal to	
ensure proper listing.	artinent shall be i	otilied of the removal to	
*The demolition contractor is responsible for submitting verification of proper disp	osal prior to the F	nal inspection	
The community community to respond to the community form containing form conta	oddi prior to the r	mar mapocaon.	
**PLEASE NOTE**Failure to completely demolish, remove, and clear the premise	es will result in the	withholding of the Certificate	
of Compliance. Thus, future permits for the property will be denied, and fines ma	y be imposed for	ailure to complete demolition/	
removal.			
		NA NA NIE BY N DI COSS N	
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina reg I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Perm			
10/2/-			
Vyjary V Z	15/21		
Signature of Owner or Owner's Agent  **This application expires 6 months from the initial date if no pe	rmits have been issu	ed**	
The second secon			

Asbestos requirements are applicable if the occupancy use is or changes to C or if multiple structures are being demolished & removed at	ommercial (not residential), one time.
a a	
An Asbestos Inspection Report prepared by an N:C. Accredited Asbestos Inspector must demolish any building including residences demolished for commercial or industrial expansion of responsibility to properly notify the Department of Health and Human Services Division of Control Unit at least ten (10) working days before the demolition is to begin whether or not asbestos.	or structures. It is the contractor's Public Health – Health Hazards
I hereby certify that the information on this application is correct and that all work in	connection with the above
referenced job will be performed under my supervision and that such work complies wi	
State Building Codes and applicable Harnett County Ordinances. Call for inspection	at proper stage of work.
Marty J. 2 6/3/21	
CONTRACTOR / APPLICANT DATE LICENSE	ND. (If applicable)
Please contact the Department of Health and Users Constant for the large	
Please contact the Department of Health and Human Services for their requirements and http://www.epi.state.nc.us/epi/asbestos/ahmp.html	pennit information.