



Initial Application Date: \_\_\_\_\_

Application # \_\_\_\_\_

CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\*

LANDOWNER: Jimmy W. West Mailing Address: 939 Shady Grove Rd.  
City: Spring Lake State: N.C. Zip: 28390 Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

APPLICANT\*: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

ADDRESS: Shady Grove Rd PIN: 0523-26-8919-000

DEED OR OTP: 3658 / 884

PROPOSED USE:

SFD: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ # Baths: \_\_\_\_\_ Basement(w/wo bath):  Garage:  Deck:  Crawl Space:  Slab:  Monolithic Slab:   
(Is the bonus room finished?  yes  no w/ a closet?  yes  no (if yes add in with # bedrooms)

Mod: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Basement (w/wo bath)  Garage:  Site Built Deck:  On Frame  Off Frame   
(Is the second floor finished?  yes  no Any other site built additions?  yes  no

Manufactured Home:  SW  DW  TW (Size 28 x 78) # Bedrooms: 4 Garage:  (site built?)  Deck:  (site built?)

Duplex: (Size \_\_\_\_\_ x \_\_\_\_\_) No. Buildings: \_\_\_\_\_ No. Bedrooms Per Unit: \_\_\_\_\_ Future F 20x15

Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: 13 10x15

Addition/Accessory/Other: (Size \_\_\_\_\_ x \_\_\_\_\_) Use: \_\_\_\_\_ Closets in addition?  yes  no

Water Supply:  County  Existing Well \_\_\_\_\_ New Well (# of dwellings using well \_\_\_\_\_) \*Must have operable water before final  
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply:  New Septic Tank  Expansion \_\_\_\_\_ Relocation \_\_\_\_\_ Existing Septic Tank \_\_\_\_\_ County Sewer  
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above?  yes  no

Does the property contain any easements whether underground or overhead  yes  no

Structures (existing or proposed): Single family dwellings: \_\_\_\_\_ Manufactured Homes:  Other (specify): \_\_\_\_\_

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Jimmy W. West  
Signature of Owner or Owner's Agent

12-17-2018  
Date

\*\*\*It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\*

\*This application expires 6 months from the initial date if permits have not been issued\*\*

APPLICATION CONTINUES ON BACK

strong roots • new growth

**\*\*This application expires 6 months from the initial date if permits have not been issued\*\***

**\*This application to be filled out when applying for a septic system inspection.\***

**County Health Department Application for Improvement Permit and/or Authorization to Construct**

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

**Environmental Health New Septic System**

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**

**Environmental Health Existing Tank Inspections**

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**

**"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"**

**SEPTIC**

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted       Innovative       Conventional       Any  
 Alternative       Other \_\_\_\_\_

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES     NO    Does the site contain any Jurisdictional Wetlands?  
 YES     NO    Do you plan to have an irrigation system now or in the future?  
 YES     NO    Does or will the building contain any drains? Please explain. \_\_\_\_\_  
 YES     NO    Are there any existing wells, springs, waterlines or Wastewater Systems on this property?  
 YES     NO    Is any wastewater going to be generated on the site other than domestic sewage?  
 YES     NO    Is the site subject to approval by any other Public Agency?  
 YES     NO    Are there any Easements or Right of Ways on this property?  
 YES     NO    Does the site contain any existing water, cable, phone or underground electric lines?  
 If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

**I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.**

# Harnett GIS

NOT FOR LEGAL USE



GIS/E-911 Addressing  
December 17, 2018

- Recycle Center
- Landfills
- Surrounding County Boundaries
- Federal Property

- City Limits
- Address Numbers
- Airport
- MajorRoads**
- Interstate

- NC
- US
- Roads
- Mile\_Markers
- Railroad

**SITE PLAN APPROVAL**

Parcels

**DISTRICT** Rural USE

**#BEDROOMS** 4

**Date** 12/19/18

Zoning Administrator  
1 inch = 94 feet

*Burnett*

PC#E Slide 142-B



- LEGEND**
- Lines Surveyed
  - - - Lines Not Surveyed
  - EIP - Existing Iron Pipe Control Corner
  - ECM - Existing Concrete Monument
  - NIP - New Iron Pipe
  - PKN - P K Nail
  - DMD - Double Meridian Distance
  - R/W - Right of Way
  - DB - Deed Book
  - CM - Concrete Monument
  - ELS - Existing Lightwood Stake

Deed Ref. 302/296  
430/144

NORTH CAROLINA  
TOWN OF ANDERSON CREEK

I, W. Stanton Masson III, certify that this plat was drawn under my supervision from the actual survey made under my supervision (unless demolition recorded in Book \_\_\_\_\_, and I certify, that the ratio of precision as calculated by latitude and departure is 1/100,000, that the boundaries not surveyed are shown as broken lines plotted from information found in Book \_\_\_\_\_, and that this plat was prepared in accordance with G. S. 47-30 as amended. Witness my original signature, registration number and seal this 20 day of July, A.D. 1991.

Seal or Stamp W. Stanton Masson III  
Surveyor  
L-2472  
Registration Number

NORTH CAROLINA  
TOWN OF ANDERSON CREEK

I, a Notary Public of the County and State aforesaid, do hereby certify that W. Stanton Masson III, 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 20 day of July, 1991.

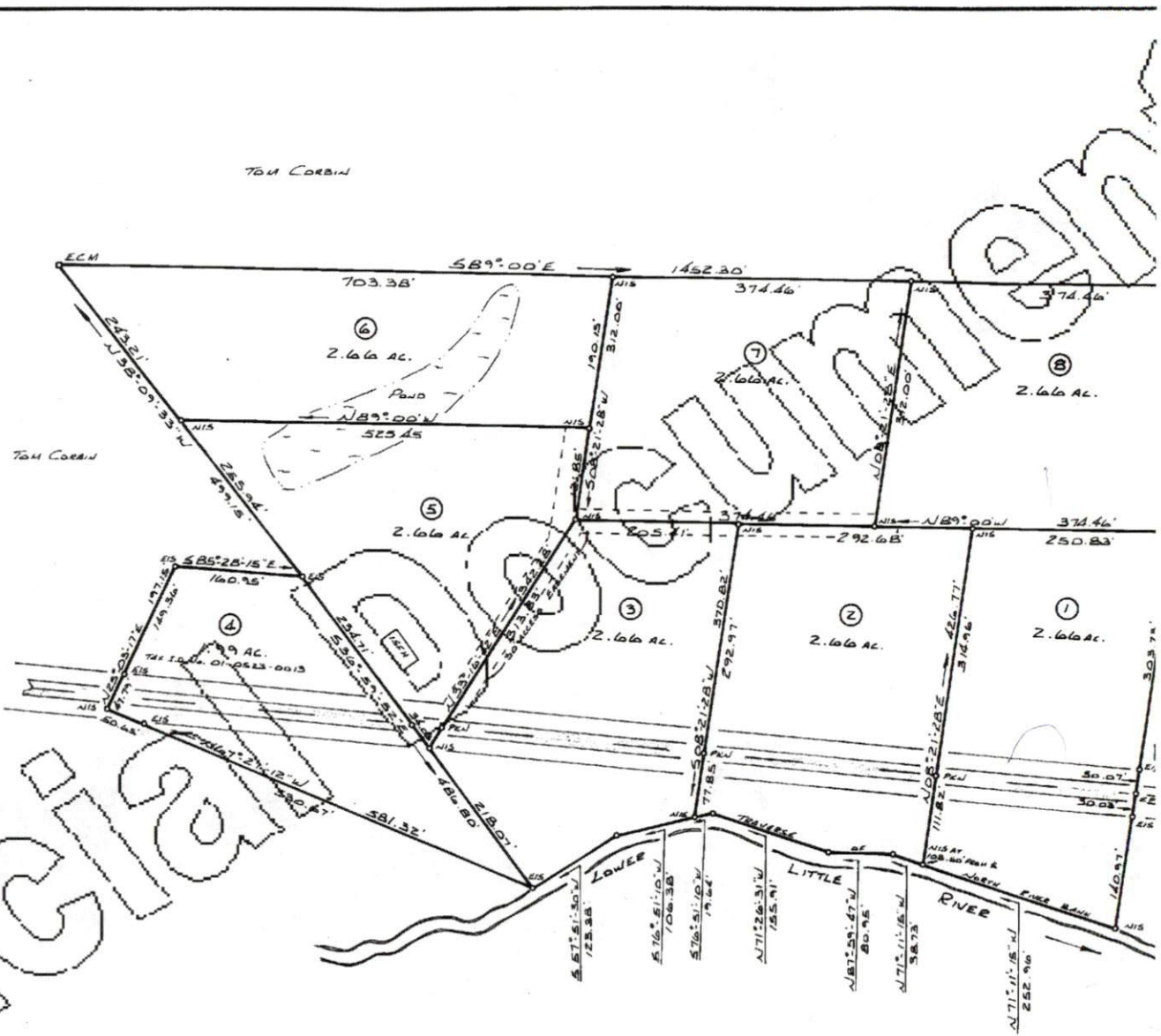
Pamela G. Masson III  
Notary Public

My Commission expires 11-18-1991



For foregoing certificate of Pamela G. Masson III, Notary Public, in and to be current, this instrument was presented for registration and recorded in Book 142 of Deeds, this 14 day of July, 1991 at 2:45 P.M.

Paul O. Riddle, Registrar of Deeds  
Gynthia O. Riddle, Assistant Registrar of Deeds



This division of land is taken except from the Barnett Family Partitioned Operations.

Date: 12 July 91 T. Taylor  
T. Taylor

REVISIONS	PROPERTY OF <b>WILLIE WEST</b>		W. STANTON MASS ROUTE 2 BOX 320 FOUR OAKS N.C. 275	
	TOWNSHIP: ANDERSON CREEK	COUNTY: HARGETT	DATE: 5-20-1991	SURVEYED 6
STATE: NORTH CAROLINA		SCALE: 1"=100'		DRAWN BY:
ZONE: 01		TAX MAP: D523	PARCEL: 0011	CHECKED & CLOSURE BY:

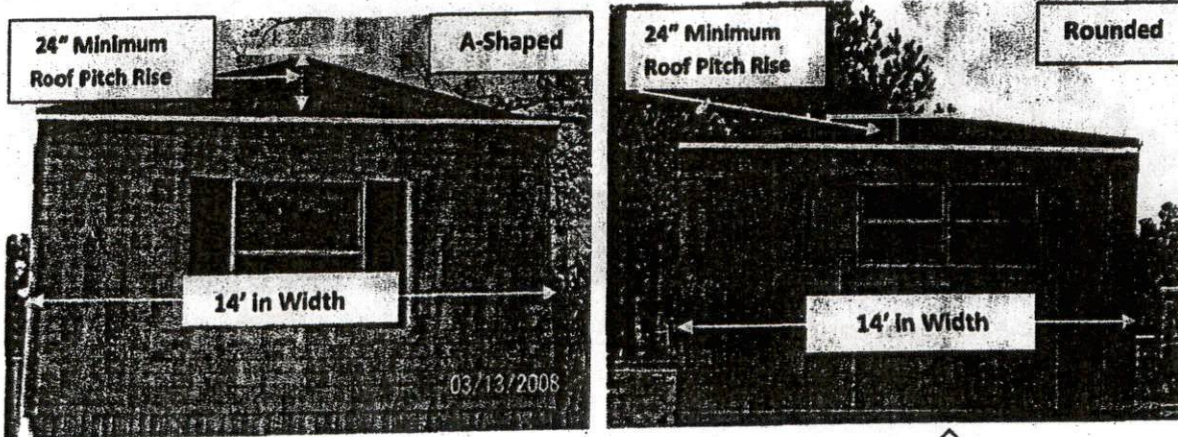
Recorded in Book of Maps Vol. PC#E Pg. Slide 142-B

### PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

#### RA-20R & RA- 20M Certification Criteria

I, \_\_\_\_\_ understand that because I'm located in a RA-20R or RA-20M Zoning District and wish to place a manufactured home in this district I must meet the following criteria, verified by zoning inspection approval, before I will be issued a certificate of occupancy for this home.

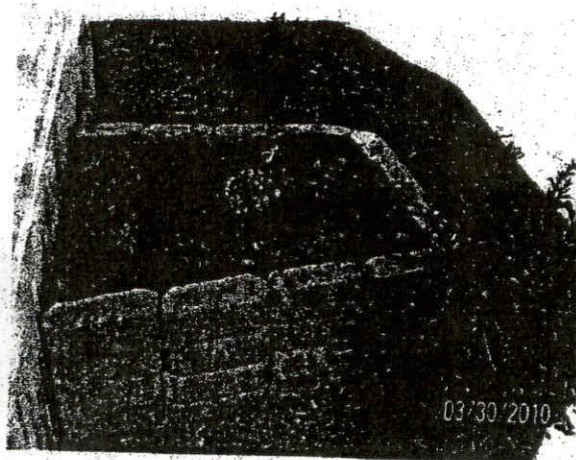
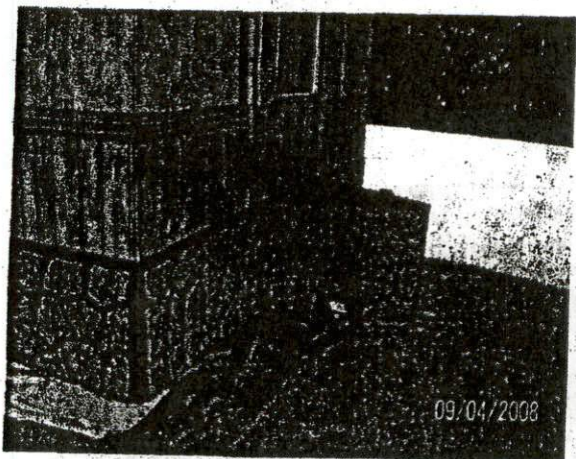
1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See illustrations Below.)



Note: Most Rounded Roofs Will Not Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)

Continued.....

2. The home must be underpinned, consisting of a brick curtain wall or have galvanized metal sheeting, ABS or PBC plastic color skirting with interlocking edges, installed around the perimeter of the home. Skirting shall be consistent in appearance, in good condition, continuous, permanent, and unpierced except for ventilation and access.
3. The homes moving apparatus must be removed, underpinned, or landscaped. (See examples below.)



4. The home must have been constructed after July 1<sup>st</sup> 1976.

*James W. West*  
Signature of Property Owner / Agent

12-17-2018

Date

- By signing this form the owner / agent is stating that they have read and understand the information on this form.