

Initial Application Date: 12/20/2019 Application # BRES 1812-0035
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 LANDUSE APPLICATION
LANDOWNER: Shown Miller Mailing Address: 95 Rolling Stone Ct
City: Sanfard State: NC zip: 27332 Contact No: Email: Shawn.dot. miller @groll.co
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email: Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Shown Miller Phone # 910-322-831Z
ADDRESS: 95 Rolling Stone Cot, Sonford, NC 27332 PIN: 9587-83-3586,000
DEED OR OTP: 2016006027
PROPOSED USE:
SFD: (Sizex) # Bedrooms:# Baths:Basement(w/wo bath):Garage:Deck:Crawl Space:Slab:Slab:
Mod: (Size x) # Bedrooms # Baths Basement (w/wo bath) Garage: Size Built Deck: On Frame OffFrame (Is the second floor finished? () yes () no Any other size built additions? () yes () no
Manufactured Home: SW DW TW (Size x) # Bedrooms: Garage: site built? Deck: site built?
Duplex: (Sizex) No. Buildings:No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees: Called 12/2/1/8
Addition/Accessory/Other: (Sizex) 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 (X) no
Does the property contain any easements whether underground or overhead () yes (X) 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. 20181220

Signature of Owner's Agent

Note

Signature of Owner's Agent

Date

This application of Owner's Agent

Signature o

strong roots · new growth

NORTH CAROLINA

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

- <u>All property irons must be made visible</u>. 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 <u>undergrowth</u> 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.

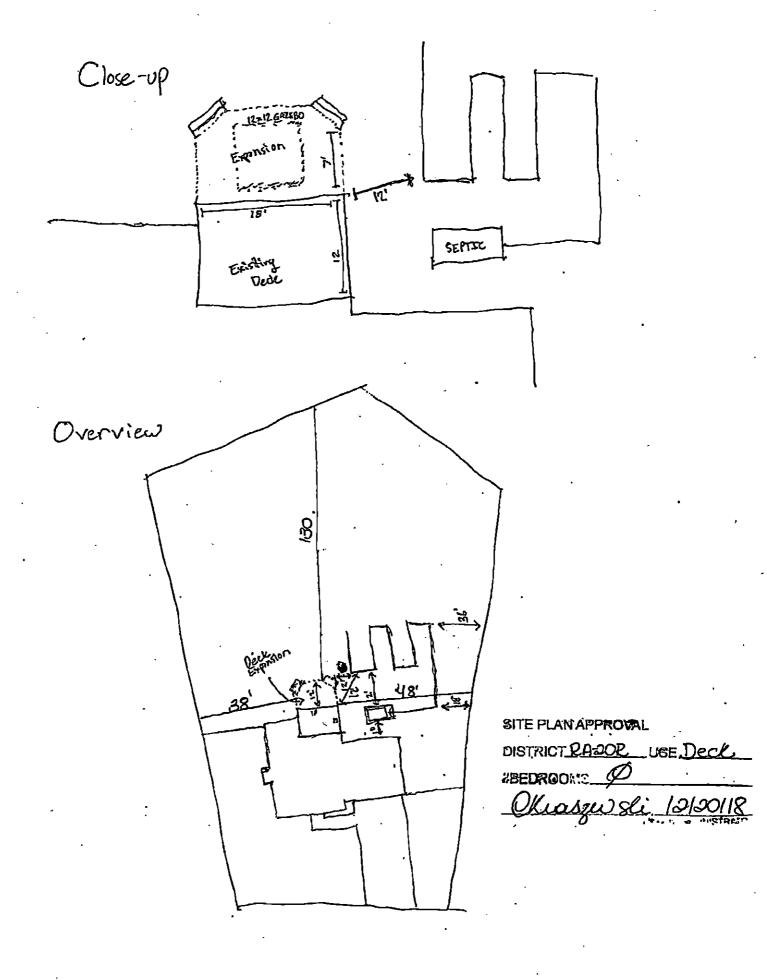
Environmental Health Existing Tank Inspections

- 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"

<u>SEPTIC</u>	·		
If applying for author	ization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{}} Accepted	{}} Innovative {}} Conventional {}} Any		
{}} Alternative	{}} Other		
	otify the local health department upon submittal of this application if any of the following apply to the property in er is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:		
{}}YES	Does the site contain any Jurisdictional Wetlands?		
{}}YES	Do you plan to have an <u>irrigation system</u> now or in the future?		
{}}YES	Does or will the building contain any drains? Please explain.		
{}}YES	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	Is the site subject to approval by any other Public Agency?		
{}}YES	Are there any Easements or Right of Ways on this property?		
{}}YES	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.



HTE # 05-500-12265

HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

17876

OPERATIONS PERMIT

Name: (owner) Kent Prence	How Installation E Septic Tank Repair		
Property Location: SR# \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Nitrification Line		
Contractor: Ted Brown	Registration #		
Basement with Plumbing: Garage:	· · · · · · · · · · · · · · · · · · ·		
Water Supply: Well Public Community Distance From Well: ft.	•		
Following are the specifications for the sewage disposa	l system on above captioned property.		
Type of system: Conventional Other	Me Chips		
Size of tank: Septic Tank: 1000 gallons Pump	Tank: gallons		
Subsurface Drainage Field No. of exact length of each ditch	width of depth of ditches 18 in.		
French Drain Required: Linear feet			
PERMIT NO. <u>22686</u>	Inspected by:		
Mc1-1000			
Mc1-1000 >70-84 540;	-		
	/ 100		
me la Larra			
C7×12			
10 -72			
Tours I			
Dave	71		
2 1 Long 125	20		
(1)2			