

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Initial Application Date:

Application # BRES1903-0000

CU#\_

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: JCFF JOHNSON Mailing Address: 1530 LAFA YE HE Rd
City: Frquay State: N. (Zip: 27526 Contact No: 919 723-6611 Email: JR Ju Johnson G YARhou
APPLICANT*: SAME Mailing Address:
City: State: Zip: Contact No: Email: *Please fill ou, upplicant information if different than landowner
ADDRESS: PIN:
ADDRESS:PIN:
Setbacks – Front: 10 Back: 40 Side: 30 Corner: 310
PROPOSED USE:
SFD: (Size x 60) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): 0 Garage: Deck: Crawl Space: Slab: Slab: Slab:
(Is the bonus   om fir   hed? () yes () no   w/ a sloset'  ) yes () no (if yes add in with # bedrooms)
☐ Mod: (Sizex) # Bedrooms# Phths Basement (w/**o bath) Garage: Site Built Deck: On Frame Off Frame
(Is the second floor finished? ( yes ( no A / other site b It add ons? () yes () no
Manufactured Home:SWDWTW (Size) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
□ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
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
Sewage Supply: New Septic Tank Expansion 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.  2 - 1 - 19
Signature of owner's Agent  ***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.***

APPLICATION CONTINUES ON BACK

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



#### \*\*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)

#### Env' onmental Health New Septic System

- <u>11 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.
- Dlace "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.
- It 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**.
- <u>All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for</u> failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.

### ☐ Environm ntal Health Existing Tank Inspections

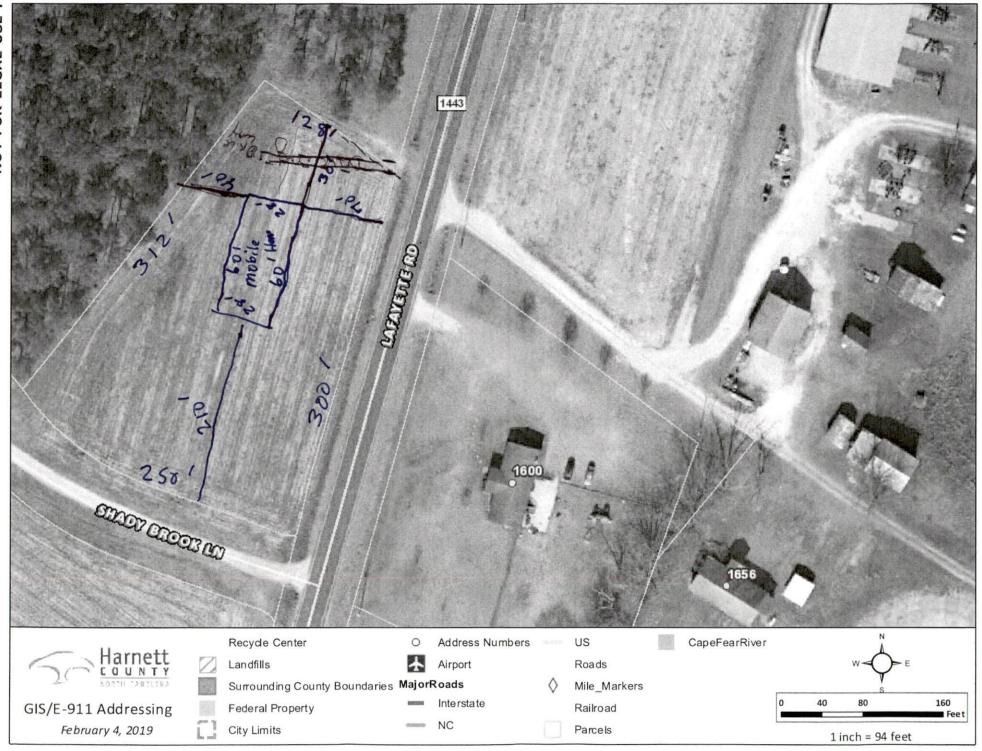
- Follow above instructions for placing flags and lard on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place**. (Unless inspection is for a septic tank in a mobile home park)
-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

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

SEPTIC		
If applying	for authorization	on 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 local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{√y NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	{\sqrt{\sqrt{NO}}} NO	Do you plan to have an <u>irrigation system</u> 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	$\{ \stackrel{\checkmark}{\longrightarrow} \}$ 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



Print this page



#### **Property Description:**

1.521 AC EH SMITH TR G 2001/3

Harnett County GIS

PID: 080653 0107 04

PIN: 0653-99-8422.000

REID: 0056055 Subdivision:

Taxable Acreage: 1.520 AC ac Caclulated Acreage: 1.35 ac Account Number: 1500010584 Owners: JOHNSON JEFFREY A

Owner Address: 1530 LAFAYETTE RD FUQUAY VARINA, NC 27526

Property Address: LAFAYETTE RD FUQUAY-VARINA, NC 27526

City, State, Zip: FUQUAY-VARINA, NC, 27526

Building Count: 0
Township Code: 08

Fire Code:

Parcel Building Value: \$0
Parcel Outbuilding Value: \$0
Parcel Land Value: \$10640
Parcel Special Land Value: \$1320

Total Value : \$10640

Parcel Deferred Value: \$9320

Total Assessed Value: \$1320

Neighborhood: 00801 Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft
Sale Month and Year: 11 / 2013

Sale Price: \$0

Deed Book & Page: 3173-0992

Deed Date: 2013/11/21

Plat Book & Page: 2001-0003

Instrument Type: WD

Vacant or Improved:

QualifiedCode: F
Transfer or Split: T

Prior Building Value: \$0
Prior Outbuilding Value: \$0
Prior Land Value: \$12160
Prior Special Land Value: \$1160

Prior Deferred Value: \$11000
Prior Assessed Value: \$12160



## PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES



## **RA-30 Criteria Certification**

1, Jeff Johnson	,	la	ando	wner/ag	gent	of	Parcel	lde	entificatio	n Nur	nbei
LAFAYEHZ Rd	located						District,				
following:											

The multi-section manufactured home shall meet the following appearance standards, verified by zoning inspection approval, prior to the issuance of a Certificate of Occupancy:

- The structure must be a multi-section unit built to the HUD code for manufactured homes.
- When located on the site, the longest axis of the unit must be parallel to the lot frontage.
- The structure must have a pitched roof that is covered with material commonly used in standard residential roofing construction. Said material must be installed properly and be consistent in appearance.
- 4. The structure must have masonry underpinning that is continuous, permanent and unpierced except for ventilation and access.
- 5. The exterior siding must consist predominantly of vinyl, aluminum, wood, or hardboard; and must be comparable in composition, appearance, and durability to the exterior siding commonly used in standard residential construction. Said exterior siding shall be in good condition, complete, and not damaged or loose.
- 6. The minimum lot size must be one (1) acre excluding any street right-of-way and the minimum lot frontage must be 150 feet as measured at the right-of-way line or along an easement whichever applies.
- 7. The tongue or towing device must be removed.

By signing this form, I acknowledge that I understand and agree to comply with each of the seven (7) appearance criteria listed above for the multi-section manufactured home I propose to place on the above referenced property. I further acknowledge that a Certificate of Occupancy (CO) entitling me to apply for electric service will not be issued until each appearance criteria has been met and approved.

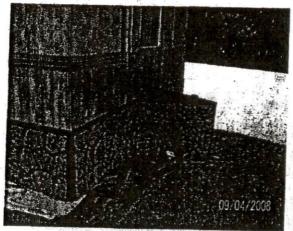
\*Signature of Landowner/Agent

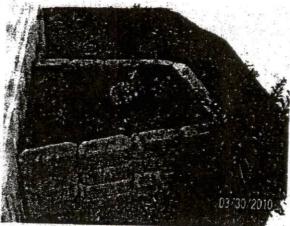
2-1-19

Date

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

- 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 1st 1976.

Signature of Property Owner / Agent

2-1-19

Date

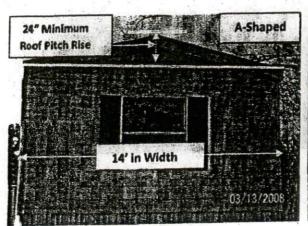
• By signing this form the owner regent is stating that they have read and understand the information on this form.

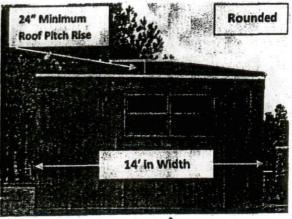
# PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

## 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 follow	ing criteria,
verified by zoning inspection approval, before I will be issued a certificate of occupancy for th	is home.

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.....