

Initial Application Date:

Application # BPFS POD- COLD

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2	
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUI	
LANDOWNER: Marisol Barrientos Estudillo Mailing Address: 69	8 church rd
City: Benson State: NC Zip: 77504 Contact No: 919-91	02-2265 Email:
APPLICANT*: Lucia Establo Vazquez Mailing Address: 698 Chu	rch rd
City: BenSon State: VC Zip: 27509 Contact No: 919-90 *Please fill out applicant information if different than landowner	02-2265 Email:
CONTACT NAME APPLYING IN OFFICE:	Phone #
DEED OR OTP:	
PROPOSED USE:	
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: (Is the bonus room finished? (
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) ☐ Garage:	
Manufactured Home: SW DW TW (Size 28 x 44) # Bedrooms: 3 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 (Need to Complete New Well Application a Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank (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	at the same time as New Tank) County Sewer
Does the property contain any easements whether underground or overhead () yes (_/) no Structures (existing or proposed): Single family dwellings:	
Structures (existing or proposed): Single family dwellings: Manufactured Homes:	Other (specify): _S_OCC
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regularity state that foregoing statements are accurate and correct to the best of my knowledge. Permit	
	2-4-19 Date
It is the owner/applicants responsibility to provide the county with any applicable information to: boundary information, house location, underground or overhead easements, etc. The confidence incorrect or missing information that is contained within the *This application expires 6 months from the initial date if permits APPLICATION CONTINUES ON BACK	on about the subject property, including but not limited ounty or its employees are not responsible for any ese applications.

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Zaning RAZO watershed NO Flood N/A



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.



{ }YES

}YES

YES

{ }YES

{ }YES

{ }YES { } NO

{ } NO

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{_} NO

{ } NO

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: Does the site contain any Jurisdictional Wetlands? { }YES { } NO { }YES { } NO Do you plan to have an <u>irrigation system</u> now or in the future?

Does or will the building contain any drains? Please explain.

Is the site subject to approval by any other Public Agency?

Are there any Easements or Right of Ways on this property?

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.

Does the site contain any existing water, cable, phone or underground electric lines?

Are there any existing wells, springs, waterlines or Wastewater Systems on this property?

Is any wastewater going to be generated on the site other than domestic sewage?

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Application # BRES1969
Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Manufactured Home Set-Up Permit

(Please fill out each part completely)

	ne Owner Information:	
Nam	ne: Lucia Estuditor Address: 8/5 Bailey, Rd.	
City:	: <u>Coats</u> State: <u>NC</u> , Zip: <u>2752</u> Daytime Phone: <u>919, 902 22 6</u>	8
Land	downer Information (To be completed by landowner, if different than above),	
Nam	ne: Marisa Barrientes Establicadoress: 815 Bailey Rd	
	: Coats State: NC Zip: 27521 Daytime Phone: 99332-0880	
Part	t II - Contractor Information (To be completed by Contractors or Homeowner, if applicable.	
A.	Name, address, & phone must match information on license) Set-Up Contractor Company Name:	
,	Phone: 919-222-1712 Address: 260 po#5 R1.	_
	City: Dudley State: N-C Zip: 28333	
	State Light 3549 Email:	
В.	Electrical Contractor Company Name: My Self / EstaV.	
	Phone: Address:	
	City: State: Zip:	
	State Lic# Fmail:	_
C.	Mechanical Contractor Company Name: my self LEstudi V	
	Phone: Address:	
	City: State: Zip:	-16
	State Lic# Email:	
D.	Plumbing Contractor Company Name: myself/ Lesly WV	
	Phone: Address:	
	City: State: Zip:	100
	State Lic# Email:	
	t III – Manufactured Home Information	
Mode	lel Year: Size: 44 X 28 Complete & follow zoning criteria sheet	
	Name:Lot Number:	_
inform	reby certify that I have the authority to apply for this permit, that the application is correct including the conmation and have obtained their permission to purchase these permits on their behalf, and that the constructuation will conform to the applicable manufactured home set-up requirements, and the Harnett County anance. I understand that if any item is incorrect or false information has been provided that this permit conked.	tion or Zoning
1	Wissel B. E. 2/6/19 Signature of Home Owner or Agent	
W COL	Signature of Home Owner or Agent Date	

List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.

SETUP

^{*}Effective July 1, 2004, a County Tax Department Moving Permit must be provided before a Set Up Permit will be issued. It is purchased from the tax office of the county that the home is moved from. If the home is from a dealer, we need proof of year on the **Form 500** and if available, the serial number.

Harnett GIS



PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

1, Marisol Barrientos	Estudilla	landowner/a		gent of	Parcel	Identification		n Nur	Number	
	, located	in an	RA-30	Zoning	District,	do	hereby	certify	the	
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.
- 2. 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

Date

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

Harnett GIS



182 216/19

Print this page



Property Description:

1.074AC TURLINGTON LAND PC#C-123A

Harnett County GIS

PID: 071610 0068

PIN: 1610-30-5265.000

REID: 0036510

Subdivision:

Taxable Acreage: 1.070 AC ac Caclulated Acreage: 1.12 ac Account Number: 1500029202

Owners: ESTUDILLO MARISOL BARRIENTOS & VASQUEZ LUCIA ESTUDILLO

Owner Address: 815 BAILEY RD COATS, NC 27521

Property Address: 815 BAILEY RD COATS, NC 27521

City, State, Zip: COATS, NC, 27521

Building Count: 0
Township Code: 07

Fire Code:

Parcel Building Value: \$0
Parcel Outbuilding Value: \$700
Parcel Land Value: \$20600
Parcel Special Land Value: \$0

Total Value : \$21300

Parcel Deferred Value : \$0

Total Assessed Value : \$21300

Neighborhood: 00700 Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft
Sale Month and Year: 10 / 2018

Sale Price: \$35000

Deed Book & Page: 3646-0499

Deed Date: 2018/10/16

Plat Book & Page: PC#C-123A

Instrument Type: WD Vacant or Improved: QualifiedCode: Q Transfer or Split: T

Prior Building Value: \$0

Prior Outbuilding Value: \$700

Prior Land Value: \$20600

Prior Special Land Value: \$0

Prior Deferred Value: \$0
Prior Assessed Value: \$21300

