Initial Application Date:



PCOL BRESI903-0015
DECK BRESI903-0016

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: Josh Wingste Mailing Address: 416 moonlight Dr
City: Fugury Varint State: NC Zip: 27526 Contact No: 99-924-9478 Email: jolwingste & gmail. com
APPLICANT*: Josh Wingote Mailing, Address: 416 Moonlight Dr.
City: Tuck pour Vorint State: NC Zip: 27526 Contact No: Some & Email: 4*Please fill ou, upplicant information if different than landowner
ADDRESS: 416 Magnight Drive PIN: 0664-79-8855.000
Zoning: ROSD Flood: NA Watershed: Name Deed Book / Page: 3450 389
Setbacks - Front: 185+ Back: 100+ Side: 19+ Corner: NA
PROPOSED USE:
Monolithic SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
Mod: (Sizex) # Bedrooms# Phths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame (Is the second floor finished? (yes (no A_/ other site b_lt add_ons? () yes () no
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms:#Employees:
Addition/Accessory/Other: (Sizex) Use: 18 Round at the ground Perosets 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 (_\(\begin{subarray}{c}\limits\) 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.

Signature of Owner or 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.

*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

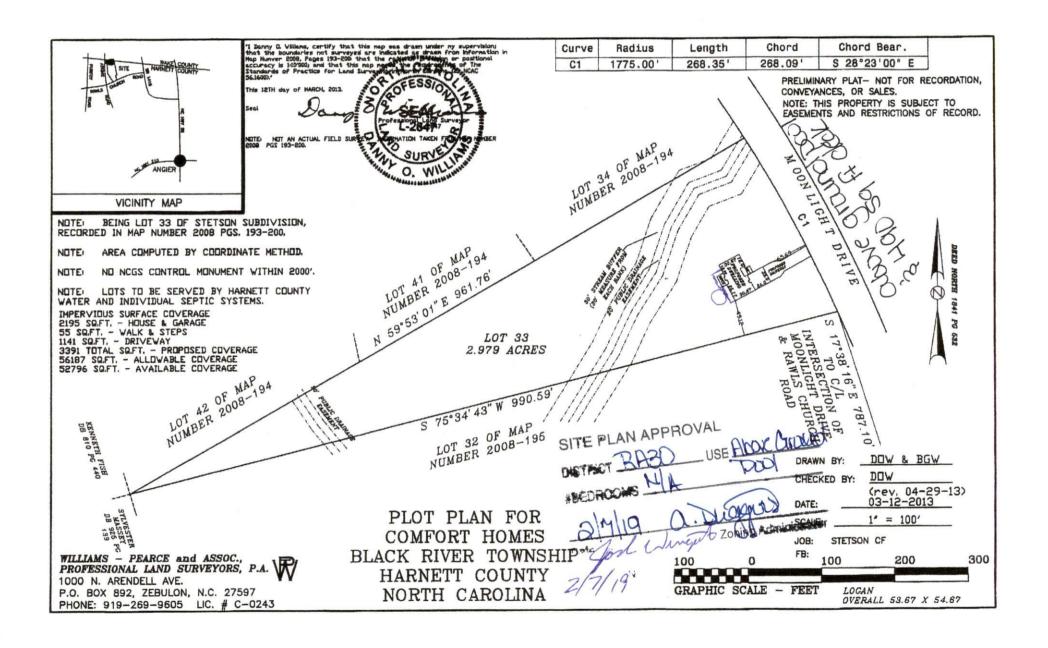
IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT
OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months;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

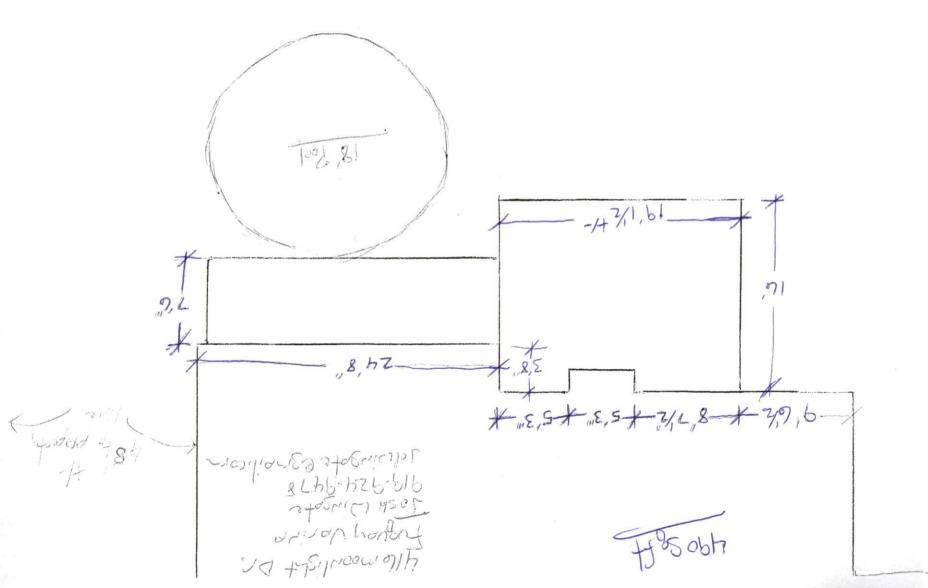
Env onmental Health New Septic System

- ! Il 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.
- 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.</u> \$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.
- ☐ Environm ntal Health Existing Tank Inspections
- Follow abc e instructions for placing flags and ard 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		The first control of the second decreases the control of the contr	
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	{V} NO	Do you plan to have an <u>irrigation system</u> now or in the future?	
{}}YES	{ <u>√</u> } 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	{ <u>√</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?	
{_}}YES	{ <u>√</u> } NO	Is the site subject to approval by any other Public Agency?	
{}}YES	{ <u></u>	Are there any Easements or Right of Ways on this property?	
{\bullet}\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.





(14)



Property Description:

LOT#33 STETSON 2.979ACS MAP#2008-193

Harnett County GIS

PID: 040674 0046 33

PIN: 0664-79-8855.000

REID: 0070323 Subdivision:

Taxable Acreage: 2.980 AC ac Caclulated Acreage: 2.95 ac

Account Number: 1500021146

Owners: WINGATE JOSHUA

Owner Address: 416 MOONLIGHT DR FUQUAY VARINA, NC 27526

Property Address: 416 MOONLIGHT DR FUQUAY VARINA, NC 27526

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

Building Count: 1
Township Code: 04

Fire Code:

Parcel Building Value: \$145430
Parcel Outbuilding Value: \$0
Parcel Land Value: \$40000
Parcel Special Land Value: \$0

Total Value: \$185430
Parcel Deferred Value: \$0
Total Assessed Value: \$185430

Neighborhood: 00484 Actual Year Built: 2013

TotalAcutalAreaHeated: 1624 Sq/Ft Sale Month and Year: 10 / 2016

Sale Price: \$195500

Deed Book & Page: 3452-0239

Deed Date: 2016/10/31

Plat Book & Page: 2008-0193

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

Prior Building Value: \$151720
Prior Outbuilding Value: \$0
Prior Land Value: \$32000
Prior Special Land Value: \$0

Prior Deferred Value: \$0
Prior Assessed Value: \$183720



HARNETT-DEVELOPMENT 108 E. Front St Lillington, NC 27546 910-893-7525

CC SALE

MID: TID: xxx9684 xxxx2853

Ref #:

228470992

Batch #:

1366143

Date/Time:

02/07/19 04:31:16 PM

Inv/Tkt #:

190207163116136

Appr Code:

Visa

068796

4xxxxxxxxxx6873

Chip Read

Amount USD\$ 100.00

Approved

VISA DEBIT

Mode: Issuer

AID: A000000031010 TVR: 8000008000

IAD: 06010A03A08000

TSI: 6800 ARC: 00

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