

Initial Application Date: \$5.1.

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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: Rene Mauricio Crespin Mailing Address: 1277 NC Huy 24
City: Cameron State: NC zip: 2832 Contact No: 919) 356-1459 Email: Crespinjacqueline Chot
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email:
ADDRESS: PIN: 9575-34-8753
Zoning: [AZDMFlood: Watershed: Deed Book / PageZ127.093 Candidan HUL ACRIS
Setbacks - Front: Back: Side: Corner:
PROPOSED USE: Monolithic
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
Manufactured Home:/SW _ DW _ TW (Size/Y x70) # Bedrooms:3 Garage:(site built?) Deck:(site built?) 2 D U U CO (5
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 (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):
f 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 hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.
D 1/25/2019

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)

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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 <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"

SEPTIC		MOND IN ORMATION MAT BE REQUIRED TO COMPLETE ANY INSPECTION								
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.										
{ } Accepted		{ } Innovative { X } 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)	NO) Does the site contain any Jurisdictional Wetlands?								
{ }YES	{ (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	{_}}(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.								

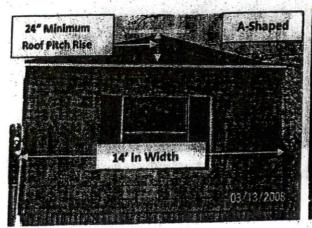
I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules, I Understand That I Am Solely Responsible 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.

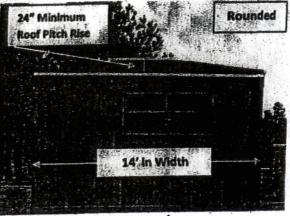
PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, Rene M. Creson, 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.

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.)

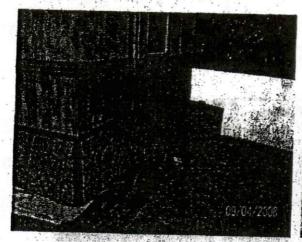


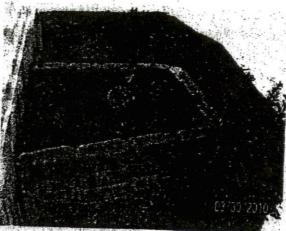


Note: Most Rounded Roofs Will Not Meet The Roof Pitch
Requirement As Illustrated. The Measurement From The Peak Of
The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of
Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)

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 1st 1976.

Date

Signature of Property Owner / Agent

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

Application #_ 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)

	Part I -	Part I –Owner Information: Home Owner Information (To be completed by owner of the manufactured home)								
_							NC Huy 2M			
/	/	^	100	V			me Phone: (919) 35 G - 1459			
	Landov	vner Inform	ation (To be c	ompleted by la	ndowner, if dif	ferent than	n above)			
	Name:	Same	as Abo	ve	Address:					
	City:			State:	Zip:	Dayti	me Phone: ()			
Part II – Contractor Information (To be completed by Contractors or Homeowner, if applicable. Name, address, & phone must match information on license)										
	rmation on license)									
		Phone: _		Addr	ess:		•			
		City:		State	ə:	Zip: _				
		State Lic#		Ema	il:					
	B.	Electrical	Contractor C	ompany Name	* Kene	M	Crespin			
		Phone: _		Addr	ess:					
		State Lic#		Ema	il:		Crespin			
	C.									
		State Lic#		Ema	il:	A 1	Crespin			
	D.	Plumbing	Contractor C	ompany Name	EN KENE	M	CRESPIN			
		Phone: _		Addr	ess:					
		State Lic#		Ema	l:					
	Part III	– Manufac	tured Home I	nformation						
ij.	Model Y	/ear:	Size: _/	4 x 70	Complete &	follow zo	oning criteria sheet			
	Park Na	ame: R	asonal Lo	nd	Lot	Number: _				
	I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf, and that the construction or installation will conform to the applicable manufactured home set-up requirements, and the Harnett County Zoning Ordinance. I understand that if any item is incorrect or false information has been provided that this permit could be revoked.									
,	Reno	Naur	sicio Co	resnin		L	1/30/2019			
	mene	Signature	of Home Own	er or Agent		-	Date			

*Effective July 1, 2004, a County <u>Tax Department Moving Permit</u> 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.

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

SETUP