Harnett 25
NORTH CAROLINA

Initial Application Date: 7.24.19

Application # BRES 1907.0055

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 GUSTAVO Conzala Hernandigt Juana L. Estrada Carriege Lane
city: Angile State: NC zip: 2750 Contact No: 410.4939649 Email: Nitragon Colecomen. Co
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
ADDRESS: 1304 KOUNLY DL. PIN: 0514.33.0899 Zoning: A20M-lood: Watershed: Deed Book / Page; 2006.00491 1(0)
Setbacks - Front: 64 Back: 2.5 + Side: 10 Corner: -
PROPOSED USE:
Monolithic SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
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
Does the property contain any easements whether underground or overhead () yes (V) no
Structures (existing or proposed): Single family dwellings: Manufactured Homes:Other (specify):
If permits are granted Lagree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted the specifications 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 limite to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any

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 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.

<u>County Health Department Application for Improvement Permit and/or Authorization to Construct</u>

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"				
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:						
{ }YES { }	NO D	Does the site contain any Jurisdictional Wetlands?				
{ }YES { }	NO D	Do you plan to have an <u>irrigation system</u> now or in the future?				
{ }YES {_}}	NO D	Does or will the building contain any drains? Please explain				
{ }YES { _ }	NO A	are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{ }YES {_}}	NO I	s any wastewater going to be generated on the site other than domestic sewage?				
{ }YES { }	NO Is	Is the site subject to approval by any other Public Agency?				
{ }YES {_}}	NO A	Are there any Easements or Right of Ways on this property?				
{ }YES {_}}	NO D	Does the site contain any existing water, cable, phone or underground electric lines?				
	1	f 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 Gran	nted Right (Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I				
Understand That I	I Am Solely	Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site				
Accessible So That	t A Comple	te Site Evaluation Can Be Performed.				
strong roots∖ new growth						

Harnett GIS





COUNTY OF Harnett
STATE OF NORTH CAROLINA

PERMIT NUMBER
Date 07/24/2019

Permission is granted to:

Juana Rivera Estrada

50 Carriage Ln Angier NC 27501

Owner

Address

Choo-Choo Homes

P.O Box 35595 Fayetteville NC 28303

Carrier

to move the following mobile home:

Fleetwood

2018

16x66

Address

FLE270VA1773369A

Make

Model

Size

Serial Number

From: 50 Carriage Ln Angier NC 27501 PID- 040673 0087 12

Address

To: __1304 Rainey Dr Spring Lake NC 28390 PID-010514 0191

Address

This permit is issued in accordance with the provisions of G.S. 105-316.1 through G.S. 105-316.8 of the general Statutes of North Carolina.

This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during its transportation.

APRIL RANGEL DIAZ

County-City Tax Collector

THIS PERMIT VALID FOR THIS MOVE ONLY.

Application # BRESIOO - 0055

Harnett County Central Permitting
PO Box 65 Lillington. NC 27540

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

		or Manufactured Home Set-Up ase fill out each part completely)	Permit 150-	
Part I -	-Owner Information:	ase im out each part completely)	, -	
	Owner Information (To be complete			
Name:	Custavo Conzalez Her	nandezAddress: 1304	Painey Drive	
City: _	Spring lake State: 1	$\frac{\sqrt{28390}}{\sqrt{28390}}$ Daytime	e Phone: (4) 493-9649	
Landov	wner Information (To be completed I	by landowner, if different than a	above)	
Name:		Address:		
City:	State:	Zip: Daytime	e Phone: ()	
Part II -	- Contractor Information (To be co			
Α.	Name, ad Set-Up Contractor Company Nam	Idress, & phone must match inform	nation on license)	
A. Set-Up Contractor Company Name: (100 - (100 + 10M - 15) - 850 (157) Address: P. 0 Box 35595				
	city: Fayetteville			
	State Lic# 3532	Email:		
B.	Electrical Contractor Company	Jame: Gustavo G. Her	nancles	
	Phone:			
	City:	State: Zip:		
	State Lic#	Email:		
C.	6. Hernandez			
	Phone:			
	City:	State: Zip:		
	State Lic# Plumbing Contractor Company	Email:	d b	
D.	Plumbing Contractor Company	Name: (Sustavo	6 Hernandes	
	Phone:	Address:	U	
	City:	State:Zip:		
	State Lic#	Email:		
Part III	Manufactured Home Information	on.		
	Year: 2018 Size: 46x 14			
Park N	lame: JW (M LMUS	Lot Number:	- 1 φ	
informatinstallat	tion and have obtained their permission will conform to the applicable mance. I understand that if any item is in	on to purchase these permits on the anufactured home set-up requirer	eation is correct including the contractor heir behalf, and that the construction or ments, and the Harnett County Zoning been provided that this permit could be	
\rightarrow	Signature of Home Owner or Age	ada	24/19 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.

04/11