

Initial Application Date: 8-8-10	
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 ww	harnett.org/permits
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND US	: APPLICATION**
LANDOWNER: JOEL HUNDLE Mailing Address: JOB CYPTESS Creek FOI	m Rd
City: Santord State: NC Zip: 27332 Contact No: 757-232-3348 Email: HOUNTEYED	sogman.com
APPLICANT: Elizabeth Hamilton Mailing Address: 4134 States Wilk Rd.	0.000 0.000 0.000 0.000
City: Chay lotte State: NC Zip: 2880 Contact No: 104-119-148 Email: Permits@60 *Please fill out applicant information if different than landowner	
*Please fill out applicant information if different than landowner  ADDRESS: 180 CYCRES CREEK FORM Rd. PIN: 039507000523	
Zoning: Flood: Watershed: Deed Book / Page:	
Setbacks - Front: Back: Side: Corner:	
PROPOSED USE: Foundation Repairs	Monolithic
SFD: (Sizex # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedi	oms)
Mod: (Sizex # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On France (Is the second floor finished? () yes () no Any other site built additions? () yes () no	a Off Frame
☐ Manufactured Home: _SW _DW _TW (Size x ) # Bedrooms:Garage: _(site built?) Deckc	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 addit	17
Water Supply:CountyExisting WellNew Well (# of dwellings using well) *Must have operable with the same time as New Tank) (Need to Complete New Well Application at the same time as New Tank) Sewage Supply:New Septic TankExpansionRelocationExisting Septic TankCounty 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 ) or dact listed above:	yes ( ) no
Does the property contain any easements whether underground or overhead () yes (X) no	
Structures (existing or proposed): Single family dwellings:	
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the speci I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false in	ormetion is provided.
Signature of Owner's Agent  Signature of Owner's Agent  ***It is the owner/applicants responsibility to provide the county with any applicable information about the subject property to: boundary information, house location, underground or overhead easements, etc. The county or its employees are n 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.**	ncluding but not limited responsible for any

APPLICATION CONTINUES ON BACK

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\*\*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

- All property irons must be made visible. Place "pink property flags" on each corner iron of lot. A 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 undergrowth to all w 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 st aight 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

OFFICE	NIA	"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION	
SEPTIC If applying	for authorizatio	n to construct please indicate desired system type(s): can be ranked in order of preference, must	hoose one.
{ } Acce	pted	{ } Innovative { } Conventional { } Any	
{ } Alter		{ } Other	
The applica question. If	nt shall notify the answer is	the local health department upon submittal of this application if any of the following apply to "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	the property in
{ }YES	NO	Does the site contain any Jurisdictional Wetlands?	
{ }YES	NO	Do you plan to have an irrigation system now or in the future?	
{ }YES	(X) NO	Does or will the building contain any drains? Please explain.	
{ }YES	(V) NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?	
{ }YES	(XYNO	Is any wastewater going to be generated on the site other than domestic sewage?	
{ }YES	(XNO	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 Truc, Complete And Correct. Author zed 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.



Application #

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## Application for Residential Building and Trades Permit

or or noting.		
Owner's Name: Joel Huante	Date	8-8-19
Site Address: 120 Cypress Creek Farm Rd.	Phone: 75°	-832-3342
Subdivision:	Lot:	*
Description of Proposed Work: Attached on Septimite de	ocument.	
General Contractor Information		
Falcone Crawl Space & Structural Repair, UC. Building Contractor's Company Name		98
	Permits@fatconecy Email Address	amispace.com
71317 License #		
Electrical Contractor Information	<u>n</u>	
Description of Work Service Size:	Amps T-Pole: [	LYes ☐ No
Electrical Contractor's Company Name	Telephone	
Address	Email Address	
Lîcense #		
Mechanical/HVAC Contractor Inform	ation	
Description of Work		
N I / N	NAC y	
Mechanical Contractor's Company Name	Telephone	
Address	Email Address	
License #		
Plumbing Contractor Information	n	
Description of Work	# Baths	
	n baars	-
Plumbing Contractor's Company Name	Telephone	
Address	Email Address	
License #		
Insulation Contractor Information	<u>n</u>	
N I / O	A	
Insulation Contractor's Company Name & Address	Telephone	

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbi g and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcont actors permission to obtain these permits and if any changes occur including listed contractors, si a plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of
any and all changes.
<b>EXPIRED PERMIT FEES</b> - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re issue fee is as per current fee schedule.
Educaled 11 Statution 8/8/19
Signature of Owner/Contractor/Officer(s) of Corporation Date
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
General Contractor Owner Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:
Has three (3) or more employees and has obtained workers' compensation insurance to over them.
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.
Has no more than two (2) employees and no subcontractors.
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation in urance prior to issuance of the permit and at any time during the permitted work from any person, firm or conforation
Sign w/Title: Coordinates 8/9/19
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