Initial Application Date:	Application #
Central Permitting 108 E. Front Street, Lillington. NC 27546 Phone: (910) 89: LANDOWNER: Rebert Seves Own B. Mailing Addres City: City: State Seves Development Mailing Addres City: White Oak State C Zip 8 39 Contact # Ree *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Break A Rea's Terk PROPERTY LOCATION: Subdivision: 374 E Daoley State Road * State Road * Parcel: 010 690 11 1000 PIN: Parcel: 010 690 11 1000 PIN:	SS: Nholcamba Coats NC. org Holcamba Email: Nholcamba coats Nc. org SS: 4+14 NC Holy 53W N caer Kenneth registers Dintratar Net Email: registers Dintratar Net
Zoning: Flood Zone: Watershed: Deed Book&Page:	10-14
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: THEN	night on East
Structure(s) to be demolished & removed: Single family dwelling Structures (existing and/or proposed): Single family dwellings Ma	Manufactured Home Other (specify) nufactured Homes Other (specify)
Water Supply: () County () Existing Well Sewage Supply: () Existing Septlc Tank () County Sewer .	*
* If a new structure is to be replaced on this lot, please ensure that exist	ing septic system is not damaged.
* If an existing well is on site and is to be discontinued, please contact H	arnett County Environmental Health for assistance.
*Upon the issuance of the Certificate of Compliance, the Harnett County ensure proper listing,	Tax Department shall be notified of the removal to
*The demolition contractor is responsible for submitting verification of pro-	oper disposal prior to the Final inspection.
PLEASE NOTEFailure to completely demailed	
PLEASE NOTEFailure to completely demolish, remove, and clear the of Compliance. Thus, future permits for the property will be decied, and	premises will result in the withholding of the Certificate
of Compliance. Thus, future permits for the property will be denied, and removal.	fines may be imposed for failure to complete demolition/
f permits are granted I agree to conform to all ordinances and laws of the State of North C hereby state that foregoing statements are agreement and correct to the best of my knowled	dge. Permit subject to revocation if false information is provided.
Signature of Owner or Owner's Agent	1-19-2021
/	Date

"This application expires 6 months from the initial date if no permits have been issued"

Asbestos requirements are applicable if the occupancy use is or changes to Commercial (not residential), or if multiple structures are being demolished & removed at one time.

An Asbestos Inspection Report prepared by an N.C. Accredited Asbestos Inspector must be provided with application to demolish any building including residences demolished for commercial or industrial expansion or structures. It is the contractor's responsibility to properly notify the Department of Health and Human Services Division of Public Health — Health Hazards Control Unit at least ten (10) working days before the demolition is to begin whether or not the building is known to contain

I hereby certify that the information on this application is correct and that all work in connection with the above referenced job will be performed under my supervision and that such work complies with the requirements of the NC State Building Codes and applicable Harnett County Ordinances, Call for inspection at proper stage of work.

CONTRACTOR / APPLICANT

DATE

LICENSE NO. (If applicable)

Please contact the Department of Health and Human Services for their requirements and permit information. http://www.epi.state.nc.us/epi/asbestos/ahmp.html