

Initial Application Date:	Application	on#					
		CU#					
	DUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION t, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax:	N (910) 893-2793 www.harnett.org/permits					
"A RECORDED SURVEY MAP, RECORDE	D DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHE	N SUBMITTING A LAND USE APPLICATION"					
	- 10tte MatsonMailing Address: 285 Brio						
	te: NC Zip: 27332Contact No: 919.721.9844_ E						
Clark Building & Stratus PORTY 1287							
City: MOUNT ATM State: NC Zip: 27080 Contact No: 877: 272.8 Email: Stascontractor &							
ADDRESS: 285 Briarwa	d PI PIN: 9576:78	2047.000					
Zoning: RA-20R Flood: X Wa	tershed: NO Deed Book / Page: 2245 29						
Setbacks - Front; 230 Back: 131 Side: 229 Corner: 70?							
PROPOSED USE:		Monolithic					
	# Baths: Basement(w/wo bath): Garage: Deck:	Crawl Space: Slab: Slab:					
TOTAL HTD SQ FT GARAGE SQ FT	(Is the bonus room finished? () yes () no w/ a closet?	? () yes () no (If yes add in with # bedrooms)					
Modular: (Size x ) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame  TOTAL HTD SO FT (Is the second floor finished? () yes () no Any other site built additions? () yes () no							
Manufactured Home:SWDW	_TW (Sizex) # Bedrooms; Garage:(site	e built?) Deck:(site built?)					
☐ Duplex: (Sizex) No. Building	s: No. Bedrooms Per Unit:	TOTAL HTD SQ FT					
☐ Home Occupation: # Rooms:	Use: Hours of Operation:	#Employees:					
Addition/Accessory/Other: (Size 18 x2	LD) use: Storage, NOMEP	Closets in addition? () yes () no					
,							
Water Supply: County Existing Well Mew 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 TankExpansionRelocation V Existing Septic TankCounty Sewer (Complete Environmental Health Checklist on other side of application if Septic)							
	contains a manufactured home within five hundred feet (500') of	tract listed above? () yes (\underline{\unee{\underline{\underline{\underline{\underline{\underline{\underl					
Does the property contain any easements who							
Structures (existing or proposed): Single family		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 D	tur 2021					
***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 using 6 months from the initial data if particular to th							
*This applica	ation expires 6 months from the initial date if permits have n	ot been (ssued""					

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 plan = 60 months: Complete plat = without expiration)

{ }YES

|\_|YES

\\_\YES

YES INO

11140

locu	imenta	ition submitted. (C	omplete site plan = 60 mont	ns; Complete plat - without co	in and the second		
		All property iron be clearly flagge Place "orange I buildings, swim Place orange E If property is thic to be performed All lots to be failure to unco	ed approximately every nouse corner flags" at ming pools, etc. Place nvironmental Health cackly wooded, Environmed. Inspectors should be addressed within 10 lever outlet lid, mark health Existing Tank	ible. Place "pink property 50 feet between corners each corner of the property flags per site plan develor and in location that is easil ental Health requires that e able to walk freely arous business days after co- ouse corners and property a Inspections	oped at/for Central Permitting.  by viewed from road to assist in locating property.  you clean out the <u>undergrowth</u> to allow the soil evaluation and site. Do not grade property.  nfirmation. \$25.00 return trip fee may be incurred for erty lines, etc. once lot confirmed ready.		
	<ul> <li>Follow above instructions for placing flags and card on property.</li> <li>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)</li> <li>DO NOT LEAVE LIDS OFF OF SEPTIC TANK</li> <li>"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"</li> </ul>						
SE	PTIC applyi	ing for authorization	on to construct please indic	eate desired system type(s):	can be ranked in order of preserence, must choose one.		
1	} A	ccepted	{ } Innovative	{   Conventional	(; Any		
{_	_} A	lternative	Other EXISTI	ng Scptic	_		
***1	1	Laure aball natific	the local health departme	ent upon submittal of this a ATTACH SUPPORTING	oplication it any of the following apply to the projects in		
{	}YE	s (I) NO	Does the site contain ar	ny Jurisdictional Wetlands?			
		S { NO Do you plan to have an irrigation system now or in the future?					
		YES { NO Does or will the building contain any drains? Please explain					
		TES   NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?					

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.

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.

Is any wastewater going to be generated on the site other than domestic sewage?

Is the site subject to approval by any other Public Agency?

Are there any Easements or Right of Ways on this property?