

| Initial Application Date: 11-18-5 | 1021 | Applica | tion# | |
|--|--|---|---|---------------|
| Central Permitting 108 E. Fro | COUNTY OF HARNETT RE ont Street, Lillington, NC 27546 | SIDENTIAL LAND USE APPLICATI Phone: (910) 893-7525 ext:2 Fa | ON x: (910) 893-4793 www.harnett.org/ | permits |
| "A RECORDED SURVEY MAP, R | ECORDED DEED (OR OFFER TO PURC | CHASE) & SITE PLAN ARE REQUIRED WH | EN SUBMITTING A LAND USE APPLICATION | V |
| LANDOWNER: David & Ja | ckie Zirn | Mailing Address: | | |
| City: | State: Zip: C | ontact No. 240 - 472 - 6386 | Email: izirn@rowman. | com |
| APPLICANT STE General (| ontractors. LC Mailing Address | 252-435.8116 ess:PO Box 2634 | obxdreamin@veri | zon, ne- |
| City: Dunn *Please fill out applicant information if differe | State: NC Zip: 28335 C | ontact No.910.890.3979 | Email: | |
| ADDRESS: Ula Neighb | ors Rd, Dunn, NC | 2833 Hn: 1528-34-66 | 26.000 | |
| Zoning: RA - 30 Flood: | Watershed: Deed | Book / Page: | | |
| Setbacks - Front: Back: | | | | |
| PROPOSED USE: | | | | |
| SFD (Size x 1# Berlin | oms 4 # Baths 2 Basement | w/wo bath): Garage: | Mono | olithic |
| TOTAL HTD SO FT 15 12 GARAGES | OFT A (Is the bonus room fi | nished? () ves () no w/ a close | t? () yes () no (if yes add in with # | |
| | | | Tho (ii yes add ii) with a | w Dedrooms) |
| ☐ Modular: (Sizex) # 8 | edrooms # Baths Baseme | ent (w/wo bath) Garage: Sit | e Built Deck On Frame Off | Frame |
| TOTAL HTD SQ FT | (Is the second floor finished | ed? () yes () no Any other site | e built additions? () yes () no | |
| ☐ Manufactured Home:SW | _DWTW (Sizex | _) # Bedrooms: Garage:(si | te built?) Deck:(site built?) | |
| Duplex: (Sizex) No. I | Buildings: No. Be | edrooms Per Unit. | TOTAL HTD SQ FT | |
| ☐ Home Occupation: # Rooms: | Use: | Hours of Operation: | #Employees: | |
| ☐ Addition/Accessory/Other: (Size | x luse Thier | in renouration | Closets in addition? () yes (| |
| TOTAL HTD SQ FT 1572 | GARAGE & | .Gr Terrooca. | St S Closers in addition? () yes (|) no |
| Water Supply: CountyE | xisting Well New Well (# o | of dwellings using well) *N | lust have operable water before final | |
| Sewage Supply: New Septic Tan | k Expansion Relocation tal Health Checklist on other side of | nplete New Well Application at the sa | unty Sewer | |
| Does owner of this tract of land, own la | nd that contains a manufactured h | ome within five hundred feet (500") o | f tract listed above? () yes () no | |
| Does the property contain any easeme | nts whether underground or overh | | | |
| Structures (existing or proposed): Single | e family dwellings: | Manufactured Homes: | Other (specify): | |
| If permits are granted I agree to conform I hereby state that foregoing statement: | n to all ordinances and laws of the s are accurate and correct to the b | State of North Carolina regulating sest of my knowledge. Permit subject | uch work and the specifications of plant to revocation if false information is pro | s submitted. |
| Thomas | - While | 11-18 | -2021 | |
| ***It is the owner/applicants respons | ture of Owner or Owner's Agent | h any applicable information about | ate | not l'article |
| io. boundary information, nouse | ncorrect or missing information | nead easements, etc. The county of that is contained within these app om the initial date if permits have r | r 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 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. 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 undergrowth 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

CEDTIC

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

| If applying | for authoriza | tion to construct please ind | icate desired system type(s): | can be ranked in order of preference, must choose one. | | | |
|--------------------|-----------------|---|-------------------------------|---|--|--|--|
| | epted | Innovative | (Conventional | 1 Any | | | |
| _ Alte | mative | 1_1 Other | | | | | |
| The application, I | ant shall notif | fy the local health departn is "yes", applicant MUST | nent upon submittal of this a | application if any of the following apply to the property in G DOCUMENTATION: | | | |
| YES | NO NO | Does the site contain any Jurisdictional Wetlands? | | | | | |
| _ YES | IN 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. Gutters | | | | | |
|)YES | L NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? | | | | | |
| _ YES | NO NO | Is any wastewater going to be generated on the site other than domestic sewage? | | | | | |
| {_{}YES | NO NO | Is the site subject to approval by any other Public Agency? | | | | | |
| _ YES | NO NO | Are there any Easements or Right of Ways on this property? | | | | | |
| L_}YES | INO NO | | | one or underground electric lines? | | | |
| | | | | te 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. 1 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.