

Application # 5002111-0032 Initial Application Date: 11-10-21 CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits Central Permitting **A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION** Mailing Address: 2034 State: NCzip 27524Contact No: (031-949 APPLICANT*: Mailing Address: Contact No: City: State: *Please fill out applicant information if different than landowner Drove Raws Rd PIN: 0655-24-2424,000 O Flood: Minimal Watershed: Cross Deed Book / Page: 3994 Setbacks - Front: 35 ft Back: 25 ft Side: 10 ft Corner: 20 ft PROPOSED USE: SFD: (Size 024 14 8 Bedrooms: 3 # Baths: 5 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: TOTAL HTD SQ FT 30 GARAGE SQ FT 30 (Is the bonus room finished? (X) yes (_) no w/ a closet? (_) yes (X) no (if yes add in with # bedrooms) x) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame TOTAL HTD SQ FT (Is the second floor finished? (__) yes (__) no Any other site built additions? (__) yes (__) no ☐ Manufactured Home SW DW TW (Size x) # Bedrooms: Garage: (site built?) Deck: (site built?) No. Buildings:_______No. Bedrooms Per Unit:_______TOTAL HTD SQ FT Duplex: (Size Home Occupation: # Rooms: Hours of Operation: HOUSE ___ Closets in addition? (__) yes (_X) no Addition/Accessory/Other: (Size 34 x 26) Usa TOTAL HTD SQ FT GARAGE County ____ Existing Well ____ New Well (# of dwellings using well ____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

New Septic Tank ____ Expansion ____ Relocation ____ Existing Septic Tank ____ County Sewer

(Complete Environmental Health Checklist on other side of application if Septic) Sewage Supply: Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? (__) yes (__) no Does the property contain any easements whether underground or overhead (X) yes (__) no Structures (existing or proposed): Single family dwellings:_ Manufactured Homes: 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 Date ***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

APPLICATION CONTINUES ON BACK

strong roots · new growth

incorrect or missing information that is contained within these applications.***

*This application expires 6 months from the initial date if permits have not been ssued**



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"The application take filled out when applied 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)

cumenation stomac	(complete site path of monats, complete path water capitalist)
Environmental	Health New Septic System
	irons must be made visible. Place "pink property flags" on each comet from of lot. All property lines must agged approximately every 50 feet between corners.
	ge house comer flags" at each comer of the proposed structure. Also flag driveways, garages, decks, out vimming pools, etc. Place flags per site plan developed at/for Central Permitting.
	e Environmental Health card in location that is easily viewed from road to assist in locating property.
If property is to be perfore	thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation ned. Inspectors should be able to walk freely around site. Do not grade property .
	be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for
failure to ui	ncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
	ntal Health Existing Tank Inspections
	e instructions for placing flags and card on property.
	inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (<i>if possible</i>) t lid back in place. (Unless inspection is for a septic tank in a mobile home park)
	VE LIDS OFF OF SEPTIC TANK
	"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"
EPTIC	
f applying for authoriz	ation to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
} Accepted	{_}} Innovative {X} Conventional {_}} Any {}} Other _
} Alternative	{}} Other SEROVITY
he applicant shall no uestion. If the answe	ify the local health department upon submittal of this application if any of the following apply to the property in r is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
}YES \{}NO	Does the site contain any Jurisdictional Wetlands?
_}YES (XNO	Do you plan to have an <u>irrigation system</u> now or in the future?
_}YES ≥ NO	Does or will the building contain any drains? Please explain.
YES NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
_}YES ≥ NO	Is any wastewater going to be generated on the site other than domestic sewage?
_}YES ≥ NO	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	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.
Have Read This Appl	cation And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State
	A STATE OF THE PROPERTY OF THE

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.