

Initial Application Date: 2/3/22

	Date: 2/5/2				Application #_	i i	
Central Permi	itting 108 E. I	COUNTY O	F HARNETT R	ESIDENTIAL LAND USE A Phone: (910) 893-7525 ex			
#A PECO						93-2793 www.harr	
ARECO	KDED SURVEY MAP	, RECORDED DEED (O	R OFFER TO PUR	RCHASE) & SITE PLAN ARE REC	QUIRED WHEN SUBMI	TTING A LAND USE APP	LICATION**
LANDOWNER:	ndrew f	souche	7-	Mailing Address: 350	- Abatto	ir Rd.	
city: Angiver		State: A) C	Zip:2750)	Contact No: 919-427-6	678 Email: C	arefil41egu	ino.com
APPLICANT*: R	ising Sun	Pools	Mailing Add	ress: 57008 Hils	parolegn St		
City: Kalerah	ant information if diffe	State: N C	Zip: 27606 (Contact No: 919-280-3	24 Email: \	Lac 1230eg	mail-com
ADDRESS:350	4 Abath	ric Rd.		PIN: 6026	10 2054	4	
Zoning	Flend	Territoria de la companya della companya della companya de la companya della comp	The state	FIN @0 2 5	10343		
Zoning:	0.0			d Book / Page:	-		
Setbacks - Front:	Back:_	60' Side: 5	Corner:_	60			
PROPOSED US	E: .						
SFD: (Size	x) # Bed	drooms:# Baths	: Basement	(w/wo bath): Garage:	Deck: Cray	vl Snace: Slah	Monolithic
TOTAL HTD SQ FT	GARAGE	SQ FT (Is th	ne bonus room f	finished? () yes () no	w/ a closet? () ye	s () no (if yes add	in with # bedrooms)
☐ Modular: (Size	x)#	Bedrooms # Ba	ths Basem	ent (w/wo bath) Garage	e: Site Built De	ck:On Frame	Off Frame
TOTAL HTD SQ FT	4	(Is the sec	ond floor finishe	ed? () yes () no Any	other site built add	itions? () yes () no
□ Manufactured	Home:SW _	DWTW (Size	ex) # Bedrooms: Gara	ge:(site built?) Deck:(site bu	ilt?)
D D 1 (0)	x) No	. Buildings:	No. B	edrooms Per Unit:	TOT	AL HTD SQ FT	
□ Duplex: (Size							
						#Employ	/ees:
☐ Home Occupa	tion: # Rooms:	Use:_		Hours of Operation	n:		
☐ Home Occupa	tion: # Rooms:	Use:_		Hours of Operation	n:		
Home Occupa Addition/Acces	tion: # Rooms:	Use:_			n:		
Home Occupa Addition/Acces	tion: # Rooms:	Use:Use:		Hours of Operation	n:		
Addition/Acces TOTAL HTD SQ FT Water Supply:	tion: # Rooms: ssory/Other: (Size	Use:Use:	_ New Well (#	Hours of Operation	n: Cl	osets in addition? () yes 🗹 no
Addition/Acces TOTAL HTD SQ FT Water Supply: Sewage Supply:	ssory/Other: (Size County X New Septic Ta	Use:Use:	New Well (# (Need to Cor	Hours of Operation of dwellings using well mplete New Well Application Existing Sentic Tank	CI	osets in addition? () yes 🗹 no
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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. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place forange 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 prange 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 <u>undergrowth</u> 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 aut	horizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
	epted		[_] Innovative {} Conventional {} Any
{}} Alter	rnative		{}} Other
The applica question. I	nt shal f the an	l notify swer is	we the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES	(2)	NO	Does the site contain any Jurisdictional Wetlands?
{_}}YES	X	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
XYES	()	NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{_}}YES	12	NO	Is any wastewater going to be generated on the site other than domestic sewage?
{_}}YES	W:	NO	Is the site subject to approval by any other Public Agency?
{_}}YES	(8)	NO	Are there any Easements or Right of Ways on this property?
XYES		NO	Does the site contain any existing water, cable, phone or underground electric lines?
	income il		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 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.

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