



Initial Application Date: 5/20/22

Application # _____

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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING**

LANDOWNER: Kiane Gardner Mailing Address: 200 oak Haven

City: Holly Springs State: NC Zip: 27540 Contact No: _____ Email: _____

APPLICANT*: Select custom builders LLC Mailing Address: 2474 Walnut st #225 Cary NC

City: Cary State: NC Zip: 27518 Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

ADDRESS: 200 oak Haven dr PIN: _____

Tre@schwake.com

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE: Patio w/ outdoor kitchen

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Sp: _____
TOTAL HTD SQ FT _____ GARAGE SQ FT _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no)

Modular: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____
TOTAL HTD SQ FT _____ (Is the second floor finished? () yes () no Any other site built addition _____)

Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) ()

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____ TOTAL HTD SQ FT _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____

Addition/Accessory/Other: (Size _____ x _____) Use: patio outdoor kitchen Closet _____
TOTAL HTD SQ FT _____ GARAGE _____

Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have open permit
(Need to Complete New Well Application at the same time as Ne)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank _____ County Sewer _____
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed at _____

Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other _____

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

***This application to be filled out when applying for a septic system inspection**

County Health Department Application for Improvement Permit and/or Authorization

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without 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. All irons must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveway, 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 inspectors.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** 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 fee per lot. Failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed.**

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 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**

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference

- {__} Accepted {__} Innovative {__} Conventional {__} Any
- {__} Alternative {__} Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION:**

- {__} YES {/} NO Does the site contain any Jurisdictional Wetlands?
- {__} YES {/} 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. _____
- {/} 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 {__} NO Does the site contain any existing water, cable, phone or underground electric lines?