

Initial Application Date: 06/11/2022

Application #	

CU# _____

Central Permitting	COUNTY OF H	HARNETT RESIDENTIAL LAND NC 27546 Phone: (910) 893			www.harnett.org/permits
A RECORDED SU	JRVEY MAP, RECORDED DEED (OR C	OFFER TO PURCHASE) & SITE PLAN	N ARE REQUIRED WH	EN SUBMITTING A LAND	USE APPLICATION
LANDOWNER, Aaron	and Cheryl Marino	Mailing Addraga	105 Setter (Court	
	State: NC Zip				rino@yahoo.com
APPLICANT*:		Mailing Address:			
	State: Zip nation if different than landowner				
	nation if different than landowner Court Angier, NC 2750				
	Minimal Flood Risk d: Watershed:				
	Back: Side:				
PROPOSED USE:	Back Side	Corner			
□ SFD: (Sizex_) # Bedrooms: # Baths:_ _GARAGE SQ FT (Is the				
•	x) # Bedrooms # Baths		=		
☐ Manufactured Home:	SWDWTW (Size_	x) # Bedrooms:	Garage:(si	te built?) Deck:	_(site built?)
☐ Duplex: (Sizex	() No. Buildings:	No. Bedrooms Per Unit:		TOTAL HTD SQ	FT
☐ Home Occupation: #	Rooms:Use:	Hours of	Operation:		_#Employees:
*	other: (Size 27 x 15) Use: 3	Brd floor bonus room		Closets in add	lition? (<u>X</u>) yes (<u>)</u> no
TOTAL HTD SQ FT 447	GARAGE				
Sewage Supply: Ne	w Septic Tank Expansion	(Need to Complete New Well A Relocation × Existing Se	<mark>.pplication at the sa</mark> eptic Tank	me time as New Tank	vater before final)
	Environmental Health Checklist of land, own land that contains a m			f tract listed above? (_) yes (<u>×</u>) no
Does the property contain	any easements whether undergro	ound or overhead () yes (<u></u>)	<u>×</u>) no		
Structures (existing or pro	posed): Single family dwellings:	1 Manufactured	Homes:	Other (specif	y):
	ree to conform to all ordinances ang statements are accurate and c				
	Aaron Ma	•	•	5/2022	
***************************************	Signature of Owner or O			Date	and the aboutton of the Control of
	ants responsibility to provide the ation, house location, underground incorrect or missing		etc. The county of	r its employees are i	

APPLICATION CONTINUES ON BACK

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



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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

- <u>All property irons must be made visible</u>. 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 <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

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

<u>SEPTIC</u>						
If applying for authoriza	tion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.					
{}} Accepted	{} Innovative {} Conventional {} Any					
{}} Alternative	{}} Other					
	fy the local health department upon submittal of this application if any of the following apply to the property in is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:					
{}}YES	Does the site contain any Jurisdictional Wetlands?					
{}}YES	Do you plan to have an <u>irrigation system</u> now or in the future?					
{}}YES	Does or will the building contain any drains? Please explain.					
{}}YES	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?					
{}}YES	Is any wastewater going to be generated on the site other than domestic sewage?					
{}}YES	Is the site subject to approval by any other Public Agency?					
{}}YES	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.					

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.