

| Initial Application Date: | | | Application # | |
|--|--|--|---|--|
| Central Permitting 420 N | | RNETT RESIDENTIAL LAND USE 27546 Phone: (910) 893-7525 | APPLICATION | www.harnett.org/permits |
| **A RECORDED SURVEY N | IAP, RECORDED DEED (OR OFF | ER TO PURCHASE) & SITE PLAN ARE I | REQUIRED WHEN SUBMITTING A | LAND USE APPLICATION** |
| LANDOWNER: TONY | | | | |
| | | | | |
| City: Angler | State: NC Zip: | Contact No: 919 - 710 | - 0640 Email: | |
| APPLICANT*: CURTIS | STEVENS ME | ailing Address: 11912 Jo | ROAN RO. | |
| | State: NC Zip: 2 | 27603 Contact No: 919 - 524 | | remodel 56 29 mail. |
| ADDRESS: 4055 N | c 55 W | PIN: D 13 3 | 271 PG 355 | |
| Zoning: Flood: | Watershed: | Deed Book / Page: | | |
| Setbacks - Front: Bac | | | | |
| PROPOSED USE: | | | | |
| □ SFD: (Sizex)# | Bedrooms: # Baths: F | Basement(w/wo bath): Garage | e: Deck: Crawl Space | Monolithic Slab: |
| TOTAL HTD SQ FTGARA | GE SQ FT (Is the bor | nus room finished? () yes () r | no w/ a closet? () yes (' | no (if yes add in with # bedrooms |
| | | | 200 | 0.5 |
| | | Basement (w/wo bath) Gar floor finished? () yes () no | | |
| TOTALTIDOGFT | (is the second i | loor illistied: () yes () tio | Any other site built additions: | (|
| ☐ Manufactured Home:SV | VDWTW (Size | x) # Bedrooms: G | arage:(site built?) De | ck:(site built?) |
| □ Duplex: (Size x) | No Buildings: | No. Bedrooms Per Unit: | TOTAL HT | D SO ET |
| | | | | |
| ☐ Home Occupation: # Rooms | :Use: | Hours of Opera | ation: | #Employees: |
| Addition/Accessory/Other: (S | Size 24 x 32) Use: F | OLE BARN FOR L | EISURE Closets | n addition? () yes () no |
| TOTAL HTD SQ FT N/A | | VHZ/- IV/S | | |
| IOIALHIDSQFI N/A | GARAGE | | | |
| | (Ne | ew Well (# of dwellings using well _ eed to Complete New Well Applica | tion at the same time as New | able water before final Tank) |
| Sewage Supply: New Septi (Complete Environment) | c Tank Expansion | Relocation Existing Septic T other side of application if Septic) | ank County Sewer | |
| | | ufactured home within five hundred | I feet (500') of tract listed above | ve? () yes () no |
| Does the property contain any eas | sements whether undergroun | nd or overhead () yes () no |) | |
| Structures (existing or proposed): | Single family dwellings: | Manufactured Home | es:Other (| specify): |
| If permits are granted I agree to c I hereby state that foregoing state | onform to all ordinances and ments are accurate and corre | laws of the State of North Carolina ect to the best of my knowledge. F | regulating such work and the Permit subject to revocation if | e specifications of plans submitted false information is provided. |
| 1 | Signature of Owner or Own | anda Amand | 3113123 | |
| | | er's Agent county with any applicable infor | mation about the subject pr | operty, including but not limited |

to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.***

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

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)

| П | Environmental | Health Ne | w Septic S | vstem |
|---|---------------|-----------|------------|-------|
| | | | | |

- 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 <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 authorizat | ion to construct please indicate desired system type(s). can be ranked in order of preference, must choose one. |
|----------------------------|--|
| {}} Accepted | {} Innovative {} Conventional {} Any |
| {}} Alternative | {}} Other |
| | y 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 | 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 Dead This Applies | tion had Could That The Information Provided Havin Letter Council to had Council had being Council at had Council had been had been had council had been had been had council had been had council had been had |

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.