

	Applicat	tion#
"A RECORDED SURVEY MAP, RECORDED DEED (OF LANDOWNER: JOHN PRICK THEFT THIS NA City: COQYS State: NC.	Zip: <u>27531</u> Contact No: <u>910 - 890 - 4404</u> E	XX: (910) 893-2793 www.harnett.org/permits EN SUBMITTING A LAND USE APPLICATION** CT
APPLICANT: <u>JOSHVA TYTPP</u> City: <u>COQTS</u> *Please fill of applicant labeling in the state. No.	Mailing Address: 90 GilliS CT Zip: <u>37531</u> Contact No: 910-710-4733	Email: 105htriff nc egman .com
ADDRESS: NA Flood: MINIMAL Watershed: Setbacks - Front: 35 Back: 25 Side: 10 PROPOSED USE:	putkern 1356 (0034) Deed Book / Page: (000) 2870 Part Corner: 20), প্রি ারঃ
□ SFD: (Sizex) # Bedrooms:# Baths TOTAL HTD SQ FT (Is the □ Modular: (Sizex) # Bedrooms # Baths TOTAL HTD SQ FT (Is the sec	he bonus room finished? () yes () no w/ a close aths Basement (w/wo bath) Garage: Si cond floor finished? () yes () no Any other si	et? () yes () no (if yes add in with # bedrooms inte Built Deck: On Frame Off Frame te built additions? () yes () no
Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	TOTAL HTD SQ FT
Home Occupation: # Rooms: Use:	Hours of Operation:	#Employees:
Home Occupation: # Rooms:Use:_ Addition/Accessory/Other: (Sizex) Use:		

Structures (existing or proposed): Single family dwellings:_ f 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 sut hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provide

Signature of Owner or Owner's Agent It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but no

Date

Other (specify)

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

Manufactured Homes:

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

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 "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)

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

DO NOT LEAVE LIDS OFF OF SEPTIC TANK

SEPTIC

If applyin	g for authorizat	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{_}} Ac		{_} Innovative { ✓} Conventional {} Any
{_}} Alt	ernative	{_}} Other
The applic question.	ant shall notify If the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES	{ √ } NO	Does the site contain any Jurisdictional Wetlands?
YES	{ <u>√</u> } NO	Do you plan to have an irrigation system now or in the future?
}YES	{ <u>✓</u> } NO	Does or will the building contain any drains? Please explain
}YES	(<u>√</u>) NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
_}YES	{ <u>✓</u> } 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	{ <u>✓</u> } 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?
		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 Inderstand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Coccessible So That A Complete Site Evaluation Can Be Performed.

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