

Initial Application Date: 7-26-2023 Application # ___ CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hail Central Permitting "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APF Mailing Address: 94 Woodstore State NC Zip 2750/ Contact No: 910-303-5398 Email: Jouisehids Regional Mailing Address: 72) E. Gamon Ave. State: NC Zip 27597 Contact No: 984-205-8298 Email: permitting *Please fill out applicant information if different than landowner Place Angier, UK, 2750/ PIN: Flood: ____ Watershed: ___ Deed Book / Page: ____ Setbacks - Front: Back: Side: Corner: PROPOSED USE: SFD: (Size ____x___) # Bedrooms:___ # Baths:__ Basement(w/wo bath):___ Garage:___ Deck:___ Crawl Space:___ Slab:_ TOTAL HTD SQ FT GARAGE SQ FT (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add Modular: (Size ____x___) # Bedrooms ___ # Baths ___ Basement (w/wo bath) ___ Garage: ___ Site Built Deck: ____ On Frame TOTAL HTD SQ FT______ (Is the second floor finished? (___) yes (___) no Any other site built additions? (___) yes (___ Manufactured Home: SW DW TW (Size x) # Bedrooms: Garage: (site built?) Deck: (site b Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT Home Occupation: # Rooms: Use: Hours of Operation: #Emple Addition/Accessory/Other: (Size x) Use: Caw space encapsulation Closets in addition? TOTAL HTD SQ FT_____ GARAGE____ Water Supply: ____ County ___ Existing Well ____ New Well (# of dwellings using well _____) *Must have operable water be (Need to Complete New Well Application at the same time as New Tank)

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 above? (___) yes Does the property contain any easements whether underground or overhead (___) yes (___) no Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: ____ Other (specify): ____ If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specification I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false informat

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, inclu
to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not resp



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 Co IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVE OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration 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 projections are supplied to the project of the project be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, gara 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 pr
- If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the 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 I 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 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 authorizati	ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose
{} Accepted		{} Innovative {} Conventional {} Any
{}} Alternative		{}} Other
		y the local health department upon submittal of this application if any of the following apply to the party s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{_}} NO	Does the site contain any Jurisdictional Wetlands?
{_}}YES	{_}} NO	Do you plan to have an <u>irrigation system</u> 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?
		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 Co Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Ri Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And N