

	-:	Appli	cation #	
	COUNTY OF HARNETT RESID	TAITIAL LAND LICE ADDI ICA		
Central Permitting 420 McKinney	Pkwy, Lillington, NC 27546 Ph	one: (910) 893-7525 ext:1	Fax: (910) 893-2793	www.harnett.org/permits
A RECORDED SURVEY MAP, REC	ORDED DEED (OR OFFER TO PURCHAS	SE) & SITE PLAN ARE REQUIRED V	WHEN SUBMITTING A LAN	D USE APPLICATION
LANDOWNER: JEffrey Jo	thnson M	ailing Address: 1530	Lafayette	Road
city: Fuguay-varing	State NC_Zip: 21526Conta	ict No: 919-723-	Email: JrJW J	bhnsoneyano
APPLICANT*:	Mailing Address:			
City	State: Zip: Conta			
*Please fill out applicant information if different t	than landowner			
ADDRESS:		PIN: 0654-40	0-0401.00	
Zoning: RA3D Flood: NO	Watershed:_NO Deed Bo	ook / Page: 31 15 00	M2	
Setbacks - Front: 670' Back: 190)'_ Side:Corner:			
PROPOSED USE:	6-58'			Monolithic
☐ SFD: (Sizex) # Bedroor	ms: # Baths: Basement(w/w	o bath): Garage: De	ck: Crawl Space:_	Slab: Slab:
TOTAL HTD SQ FTGARAGE SQ	FT (Is the bonus room finish	ned? () yes () no w/ a clo	oset? () yes () no	(if yes add in with # bedrooms)
☐ Modular: (Sizex) # Bed	rooms# Baths Basement	(w/wo bath) Garage:	Site Built Deck:	On Frame Off Frame
TOTAL HTD SQ FT	(Is the second floor finished?	() yes () no Any other	site built additions? (_) yes () no
		_		
Maguifactured Home: SW J	TW (Size 70 x 76)	Bedrooms: 3 Garage:	(site built?) Deck:	(site built?)
Manufactured Home:SWC				
Manufactured Home:SW Duplex: (Sizex) No. Bu				
	uildings: No. Bedre	poms Per Unit:	TOTAL HTD S	GQ FT
Duplex: (Sizex) No. Bu Home Occupation: # Rooms:	uildings:No. Bedro	pooms Per Unit: Hours of Operation:	TOTAL HTD S	#Employees:
Duplex: (Sizex) No. Bu Home Occupation: # Rooms: Addition/Accessory/Other: (Size	uildings:No. Bedro	pooms Per Unit: Hours of Operation:	TOTAL HTD S	#Employees:
Duplex: (Sizex) No. But Home Occupation: # Rooms: Addition/Accessory/Other: (Size TOTAL HTD SQ FT	No. Bedra	ooms Per Unit: Hours of Operation:	TOTAL HTD S	#Employees:
Duplex: (Sizex) No. Bu Home Occupation: # Rooms: Addition/Accessory/Other: (Size	Use:No. Bedro	nooms Per Unit: Hours of Operation:	Closets in a	#Employees: ddition? () yes () no
Duplex: (Sizex) No. But Home Occupation: # Rooms: Addition/Accessory/Other: (Size TOTAL HTD SQ FT Water Supply: County Ex	Use:No. Bedree	hooms Per Unit:Hours of Operation:dwellings using well	Closets in a	#Employees: ddition? () yes () no
Duplex: (Sizex) No. But Home Occupation: # Rooms: Addition/Accessory/Other: (Size TOTAL HTD SQ FT Water Supply: County Ex	Use:No. Bedree	dwellings using well Existing Septic Tank Explication if Septic)	Closets in a	#Employees: ddition? () yes () no e water before final
Duplex: (Sizex) No. Bu Home Occupation: # Rooms: Addition/Accessory/Other: (Size TOTAL HTD SQ FT Water Supply: County Ex Sewage Supply: New Septic Tank	Use:	twellings using well ete New Well Application at the Existing Septic Tank application if Septic) ne within five hundred feet (500)	Closets in a	#Employees: ddition? () yes () no e water before final
Duplex: (Sizex) No. But Home Occupation: # Rooms: Addition/Accessory/Other: (Size TOTAL HTD SQ FT Water Supply: County Ex Sewage Supply: New Septic Tank (Complete Environmental Does owner of this tract of land, own land)	Use:	dwellings using well ete New Well Application at the Existing Septic Tank application if Septic) ne within five hundred feet (500 dd () yes () no	Closets in a / *Must have operable as same time as New Ta County Sewer // of tract listed above?	#Employees: ddition? () yes () no e water before final ink) () yes () no
Duplex: (Sizex) No. But Duplex: (Size) No. But Duplex: (Size	Use:	twellings using well Hours of Operation: Hours of Operation: the New Well Application at the Existing Septic Tank Application if Septic) The within five hundred feet (500 d) Manufactured Homes: Manufactured Homes:	Closets in a Closets in a *Must have operable same time as New Ta County Sewer Other (spe	#Employees: ddition? (yes () no e water before final ink) (yes () no ecify): pecifications of plans submitted.
Duplex: (Sizex) No. But Duplex: (Sizex	Use:	twellings using well Hours of Operation: Hours of Operation: the New Well Application at the Existing Septic Tank Application if Septic) The within five hundred feet (500 d) Manufactured Homes: Manufactured Homes:	Closets in a Closets in a *Must have operable same time as New Ta County Sewer Other (spe	#Employees: ddition? (yes () no e water before final ink) (yes () no ecify): pecifications of plans submitted.
Duplex: (Sizex) No. But	Use:	dwellings using well tete New Well Application at the Existing Septic Tank Application if Septic) the within five hundred feet (500 Manufactured Homes: tate of North Carolina regulating to f my knowledge. Permit sub	Closets in a Closets in a Nust have operable as ame time as New Ta County Sewer Other (speng such work and the spect to revocation if false as the bout the subject properable bout the subject properable as the subject prope	#Employees: ddition? () yes () no e water before final ink) () yes
Duplex: (Sizex) No. But Home Occupation: # Rooms: Addition/Accessory/Other: (Size TOTAL HTD SQ FT Exception Tank (Complete Environmental Does owner of this tract of land, own land Does the property contain any easement Structures (existing or proposed): Single If permits are granted I agree to conform I hereby state that foregoing statements Signature	Use:	booms Per Unit: Hours of Operation: the lete New Well Application at the Existing Septic Tank application if Septic) the within five hundred feet (500 dd () yes () no Manufactured Homes:	Closets in a Closets in a Closets in a New Ta County Sewer Other (spe g such work and the spect to revocation if fals Ta Date bout the subject property or its employees ar applications.***	#Employees: ddition? () yes () no e water before final ink) () yes

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 BE COME in VALID.

documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon

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 undergrowth 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"	
SEPTIC If applying for authorizati	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	
	with the local health department upon submittal of this application if any of the following apply to the pressing significant MUST ATTACH SUPPORTING DOCUMENTATION:	operty in
YES	Does the site contain any Jurisdictional Wetlands?	
{_}}YES { ½ }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 TNO	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 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.