

Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

LANDOWNER: Christina Weger Mailing Address: 245 Brumfield Rd
City: Cameron State: NC Zip: 28326 Contact No: 317-590-4530 Email: christiweger@gmail.com

APPLICANT: Christina Weger Mailing Address: 245 Brumfield Rd
City: Cameron State: NC Zip: 28326 Contact No: 317-590-4530 Email: christiweger@gmail.com
*Please fill out applicant information if different than landowner

ADDRESS: 245 Brumfield Rd PIN: _____

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: 76ft Corner: _____

PROPOSED USE:

SFD: (Size 30 x 50) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____
TOTAL HTD SQ FT _____ GARAGE SQ FT _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # Bedrooms _____ # 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

Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____ TOTAL HTD SQ FT _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size 30 x 50) Use: Storage Shed Closets in addition? () yes () no
TOTAL HTD SQ FT _____ GARAGE _____

Water Supply: [X] County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(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 () no

Does the property contain any easements whether underground or overhead () yes [X] 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 specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

[Signature]
Signature of Owner or Owner's Agent

10-6-23
Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, 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



Application # _____

Harnett County Central Permitting

420 McKinney Pkwy Lillington, NC 27546

PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Christina Weger Date _____

Site Address: 245 Brumfield Rd Cameron, NC 28326 Phone 317-590-4530

Subdivision: _____ Lot _____

Description of Proposed Work: Storage Building Total Job Cost _____

General Contractor Information

Triple A Steel

Building Contractor's Company Name

200 Blanket Ln Elkin, NC 28621

Address

336-443-0606

Telephone

jonathan.m.triple@gmail.com

Email Address

HEATED SQ FT _____

GARAGE SQ FT _____

30x50

License # _____

Electrical Contractor Information

Description of Work _____ Service Size: _____ Amps T-Pole: Yes No

Electrical Contractor's Company Name N/A

Telephone _____

Address _____

Email Address _____

License # _____

Mechanical/HVAC Contractor Information

Description of Work N/A

Mechanical Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

License # _____

Plumbing Contractor Information

Description of Work N/A # Baths _____

Plumbing Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____

Telephone _____

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

Google Maps



Google

APPENDIX H

**AFFIDAVIT OF ON-SITE WASTEWATER EXISTING SYSTEM
PUSUANT TO N.C.G.S. §160D-1110(h1)**

[This form is only required with a permit application if the permit applicant is applying for exemption as allowed by N.C.G.S. § 160D-1110(h1)]

STATE OF NORTH CAROLINA

COUNTY OF Harnett

_____ Inspection Department

Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered:

245 Brunfield Rd

Cameron, NC 28326

I, Christina Weger

(Print Full Name)

owner of the property, do hereby under penalties of perjury affirm that the proposed building construction will meet local and State on-site wastewater system setback requirements pursuant to N.C.G.S. § 130A-335. Additionally, the proposed construction shall not increase the design daily flow or wastewater strength of the existing system and thereby absolves the State, Inspection Department, and Local Health Department of any responsibility or liability regarding the existing wastewater system.

The property owner may, at his or her discretion, consult with an authorized on-site wastewater evaluator certified by the North Carolina On-Site Wastewater Contractors and Inspectors Certification Board or an inspector, as defined in N.C.G.S. § 90A-71(5), to locate the on-site wastewater existing system and verify setbacks requirements prior to executing this affidavit.

[Signature]

(Signature of Affiant)

10-6-23

Date

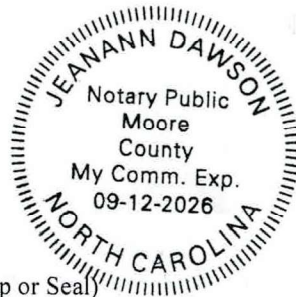
Sworn to (or affirmed) and Subscribed before me this the _____ day of _____, 20____

[Signature]

Signature of Notary Public

Jeanann Dawson

Printed Name of Notary Public



My Commission Expires: 9/12/2024 (Notary Stamp or Seal)