

9-11-74

Application # CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 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\*\* Mailing Address: 1825 W. BLACKMAN ROAD State: NC Zip: 28334 Contact No: 910 303 7505 Email: art bydoc @ graci l. com HINES Mailing Address: P.O. BOX 597 State: NC Zip: 28335 Contact No: 910 303 7505 Email: art by doe gmail. Com ADDRESS: 1825 W. BLACKMAN RD PIN: 1504-16-7594.000 Deed Book / Page: 3381 PG974 Watershed:\_\_\_ Back: Side: Corner: Setbacks - Front: PROPOSED USE: Monolithic SFD: (Size 30 x 40) # Bedrooms. # Baths: Basement(w/wo bath): Garage: \* Deck: Crawl Space: Slab: Slab: GARAGE SQ FT 100 (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 (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?\_\_\_) No. Bedrooms Per Unit: TOTAL HTD SQ FT Duplex: (Size \_\_\_\_x\_\_\_) No. Buildings:\_\_\_\_ Hours of Operation: Home Occupation: # Rooms: Addition/Accessory/Other: (Size x Quse: metal building Closets in addition? (\_) yes (\_) no GARAGE 120 \_) \*Must have operable water before final Water Supply: \_\_\_\_ County \_\_\_\_ Existing Well \_\_\_\_ New Well (# of dwellings using well \_\_\_\_ 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: 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. 9-11-24 Signature of Owner or Owner's Agent

The street 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.\*

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 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)

Envir	onmontal He	solth New Centie System
• A	II property in	ons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines mus
		ged approximately every 50 feet between corners.
• P	lace "orange uildings, swin	house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, our ming pools, etc. Place flags per site plan developed at/for Central Permitting.
• P	lace orange E	invironmental Health card in location that is easily viewed from road to assist in locating property.
to	be performe	ckly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation d. Inspectors should be able to walk freely around site. Do not grade property.
• <u>A</u>	Il lots to be	addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred fo
<u>fa</u>	ilure to unce	over outlet lid, mark house corners and property lines, etc. onde lot confirmed ready.
		I Health Existing Tank Inspections
		nstructions for placing flags and card on property.
• P	repare for ins	pection by removing soil over <b>outlet end</b> of tank as diagram indicates, and lift lid straight up (if possible <b>d back in place</b> . (Unless inspection is for a septic tank in a mobile home park)
		ELIDS OFF OF SEPTIC TANK
I E CHIEF		
		"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"
	for authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
} Acc	epted	[_] Innovative {] Conventional {] Any
} Alte	rnative	{} Other
		the local health department upon subplittal 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	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	{_}} 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?
	Pric pplying Acc	be clearly flagg Place "orange buildings, swim Place orange E If property is thi to be performe All lots to be failure to unce Environmenta Follow above in Prepare for ins and then put Ii DO NOT LEAVE  PTIC Accepted Alternative applicant shall notify stion. If the answer is YES NO

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.

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.