

Initial Application Date: 11/18/2024 Application #

| | | | | | | CU# | |
|---|--|----------------------------------|--|--|----------------------|----------------------|--------------------|
| Central Permitting | COUNTY 420 McKinney Pkwy, Lillii | | RESIDENTIAL LANI Phone: (910) 89 | | CATION | | arnett.org/permits |
| | RVEY MAP, RECORDED DEEL | | | | | | |
| ANDOWNED, LOURON | Hadley | ` | Mailing Addraga | . 168 Wa | odview Ct | | |
| | • | | _ | | | | |
| City: <u>Fuquay Varına</u> | State: NC | <u>, Zip: 27526</u> | Contact No: 919 | 1-542-919 | 18 Email: Lau | rennadieyos | egmail.com |
| APPLICANT*: Maegan | l Hewett | Mailing Ad | dress: 120 Pre | ston Exec | utive Dr. | | |
| City: Cary Please fill out applicant inform | State: No | <u>C</u> zip: <u>27513</u> er | Contact No: <u>919-</u> | 761-3862 | Email: Meo | <u>j@elitexterio</u> | rsnc.com |
| | lview Ct. Fuquay Va | | 26pin: | | | | |
| oning: Flood | d: Watershe | ed: De | ed Book / Page: | | | | |
| Setbacks – Front: | Back: Side:_ | Corner: | . | | | | |
| PROPOSED USE: | | | | | | | |
| ☑ SFD: (Size x |) # Bedrooms: # Ba | aths: Basemer | nt(w/wo bath): | Garage: D | eck: Crawl | Space: Slab | Monolithic: Slab: |
| | GARAGE SQ FT(| | | - | | | |
| OTAL HTD SQ FT | x) # Bedrooms # (Is theSWDWTW (| second floor finis | shed? () yes () |) no Any othe | er site built additi | ons? () yes (_ |) no |
| Duplex: (Sizex |) No. Buildings: | No. | Bedrooms Per Unit: | | TOTAL | _ HTD SQ FT | |
| Home Occupation: # F | Rooms:U | se: | Hours of | Operation: | | #Emp | oloyees: |
| ☐ Addition/Accessory/O | ther: (Sizex) l | Use: | | | Clos | sets in addition? | () yes () no |
| OTAL HTD SQ FT | | | | | | | ,, |
| | | | | | | | |
| Vater Supply: 🔽 Cour | nty Existing Well | New Well (| (# of dwellings using omplete New Well A | well |) *Must have o | perable water b | efore final |
| | v Septic Tank Expan | sion Reloca | tionExisting Se | eptic Tank 🖊 | | New Talik) | |
| Complete) Does owner of this tract of | Environmental Health Che land, own land that contain | cklist on other sid | d home within five hu | <mark>:ptic)</mark> indred feet (50 | 0') of tract listed | above? () yes | s 🔼) no |
| Does the property contain a | any easements whether ur | nderground or ove | erhead () yes (| <u>/</u>) no | | | |
| Structures (existing or prop | osed): Single family dwelli | ngs: <u> V </u> | Manufactured | Homes: | Oth | ner (specify): | |
| | ee to conform to all ordinal g statements are accurate | | | | | | |
| 9 | m bour | | | 1 | 1/18/2024 | | |
| - | Signature of Owner | r or Owner's Age | ent | | 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

strong roots · new growth



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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

- <u>All property irons must be made visible</u>. 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)
- DO NOT LEAVE LIDS OFF OF SEPTIC TANK

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

| <u>SEPTIC</u> | | | | | | | | |
|-----------------|-------------------|--|--|--|--|--|--|--|
| If applying | for authorization | on to construct please indicate desired system type(s): car | be ranked in order of preference, must choose one. | | | | | |
| {}} Accepted {_ | | {}} Innovative {}} Conventional | {}} Any | | | | | |
| {}} Alternative | | {}} Other | | | | | | |
| | | the local health department upon submittal of this applies "yes", applicant MUST ATTACH SUPPORTING D | | | | | | |
| {}}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 | { <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 | { ✓ } 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.