

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

## RESIDENTIAL LAND USE APPLICATION

SITE ADDRESS: 523 Windy Farm Dr. Fuguay Varina PIN: 27526
LANDOWNER: Wade Adair Mailing Address: Same as above
City: State: Zip: Phone: Email:
*Please fill out applicant information if different than landowner.
APPLICANT: Tyler Mosko Mailing Address: 721 Fireweed Lane
applicant: Tyler Mosko Mailing Address: 721 Fireweed Lane City: Fuguay Varina State: NC zip: 27526 Phone: 910-759-1897 Email: tyler & moskolawn and homen C.
PROPOSED USE:
Single Family Dwelling: (Sizex) # Bedrooms: # Baths: Garage: Attached, Detached Accessory: Deck, Patio, Porch (Circle One)
TOTAL HTD SQ FT: GARAGE SQ FT: Foundation Type: Crawl Space:   Stem Wall:   Mono Slab:   Basement:   Basement:   Output  Basement:   Ou
☐ Modular: (Sizex) # Bedrooms: # Baths: Garage: Attached, Detached Accessory: Deck, Patio, Porch
TOTAL HTD SQ FT:
□ Manufactured Home: SW □ DW □ TW □ (Sizex) # Bedrooms: Garage: Attached, Detached Accessory: Deck, Patio (Circle One) (Circle One)
ZONING:
Duplex: (Sizex) # Buildings: # Bedrooms Per Unit:TOTAL HTD SQ FT:
addition/Accessory/Other: (Size x ) Use: Building a 20x22 Screened in Porch with an uncovered 14x20 Concrete Patio
UTILITIES:
Water Supply: County ☑ Existing Well □ New Well (# of dwellings using well) □
Sewage Supply: New Septic Tank □ Expansion □ Relocation □ Existing Septic Tank ★ County Sewer □
(Complete Environmental Health Checklist on other side of application if Septic is selected)
GENERAL PROPERTY INFORMATION:
Does the landowner own another tract that contains a manufactured home within 500 feet? YES   NO
Does the property contain any easements, whether underground or overhead? YES  NO X
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 the foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.  Signature of Owner or Owner's Agent  Date

\*\*\*Permits are valid for 6 months from the issue date, or 12 months from last inspection once inspections have been initiated. It is the owner/applicant's 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.\*\*\*



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## Environmental 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 permit shall become invalid. This permit will be valid for 60 months.

## □ NEW SEPTIC SYSTEM INSPECTION

- All property irons must be made visible. Place pink flags on each corner of lot & approximately every 50 feet between corners.
- Place orange flags at the corners of each proposed structure per site plan submitted to Central Permitting.
- Post orange Environmental Health sign in location that is visible from road to assist in locating property.
- If property is thickly wooded, you will be required to 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.

## **EXISTING TANK INSPECTION**

•	Follow above instructions for placing flags and sign on property.  Prepare for inspection by removing soil over <b>outlet end</b> of tank, lift lid straight up ( <i>if possible</i> ), and then <b>put lid back in place</b> .  *Does not apply to septic tank in a mobile home park*							
DO NOT LEAVE LIDS OFF OF SEPTIC TANK								
SEPTIO	CHECK	LIST						
If applying for Authorization to Construct, please indicate desired system type(s): Can be ranked in order of preference, must choose one.								
	☐ Accepted		☐ Innovative	□ Conventional	☐ Any	□ Alternative		
	□ Other							
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes," applicant <b>MUST ATTACH SUPPORTING DOCUMENTATION</b> :								
	YES 🗆	ио 💢	Does the site contain any	jurisdictional wetlands?				
	YES 🗆	NO X	Do you plan to have an ir	rigation system now or in	the future?			
	YES 🗆	NOX	Does or will the building of	contain any drains? Pleas	e explain:			
	YES 🗆	NO X Are there any existing wells, springs, waterlines, or wastewater systems on this property?						
	YES 🗆	ES NO X Is any wastewater going to be generated on the site other than domestic sewage?						
	YES 🗆	ио Х	Is the site subject to appr	oval by any other Public	Agency?			
	YES 🗆	NO X	Are there any easements	or rights-of-way on this p	property?			
	YES X	NO 🗆	Does the site contain any	existing water, cable, ph	one, or undergr	ound electric lines?		
			If yes, please call No Cut	s at 800-632-4949 to loca	ate the lines. Thi	s 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. I understand that a \$25.00 return trip fee may be incurred for								
failure to uncover outlet lid, mark house corners and property lines, etc. once lot is confirmed to be ready.								
Signature of Owner or Owner's Agent Date								