

strong roots · new growth

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: 84 Saddle brook Dr. Fuguay PIN:					
LANDOWNER: Chris Dillow Mailing Address: SAME					
City: Fuguay State: NC Zip: 27526 Phone: 984-268-8067 Email: CS dillow @ hotmail.com					
*Please fill out applicant information if different than landowner.					
APPLICANT: Justin Barton Mailing Address: 18 old Head Way					
City: Fuquay State: NC Zip: 27526 Phone: 919-971-9766 Email: barton design works ogmail.com					
Zone = RA30 Deadbook = 2759/863					
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: □					
□ Modular: (Sizex) # Bedrooms: # Baths: Garage: Attached, Detached Accessory: Deck, Patio, Porch					
TOTAL HTD SQ FT: (Circle One)					
□ Manufactured Home: SW □ DW □ TW □ (Sizex) # Bedrooms: Garage: Attached, Detached Accessory: Deck, Patio					
ZONING: (Circle One)					
□ Duplex: (Size 26x25) # Buildings: # Bedrooms Per Unit: TOTAL HTD SQ FT:					
Addition/Accessory/Other: (Size 20 x 25) Use: Deck					
UTILITIES:					
Water Supply: County ☑ Existing Well □ New Well (# of dwellings using well) □					
Sewage Supply: New Septic Tank □ Expansion □ Relocation □ Existing Septic Tank ២ 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 NO					
Does the property contain any easements, whether underground or overhead? YES 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 the foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.					
1 + 2 = 4					
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.





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 <u>undergrowth</u> to allow the soil evaluation to be performed.
 Inspectors should be able to walk freely around site. DO NOT GRADE PROPERTY.

Inspectors	s silibulu be	e able to walk freely around site. DO NOT GRADE PROPERTY.
 Prepare for *Does no 	ove instruction or inspection of apply to	pections for placing flags and sign on property. In by removing soil over outlet end of tank, lift lid straight up (if possible), and then put lid back in place. Septic tank in a mobile home park* DS OFF OF SEPTIC TANK
SEPTIC CHECK	LIST	
If applying for Auth	norization t	o Construct, please indicate desired system type(s): Can be ranked in order of preference, must choose one.
☐ Accep	ted	☐ Innovative ☐ Conventional ☐ Any ☐ Alternative
☐ Other		
		he local health department upon submittal of this application if any of the following apply to the answer is "yes," applicant MUST ATTACH SUPPORTING DOCUMENTATION:
YES 🗆	NO 🗆	Does the site contain any juris dictional 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 rights-of-way 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.
		and certify that the information provided herein is true, complete, and correct. Authorized County and
		right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. It responsible for the proper identification and labeling of all property lines and corners and making the
		mplete site evaluation can be performed. I understand that a \$25.00 return trip fee may be incurred for
		mark house corners and property lines, etc. once lot is confirmed to be ready.

Just	Bento		
Signature of Owner or Ow	Date		