

Initial Application Date: 5-10-10

Application # 1050024422

CU

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: TODD & ELIZABETH SUNDAY Mailing Address: 575 CRYSTAL SPRING DR

City: SANFORD State: NC Zip: 27332 Home #: 919-499-9743 Contact #: 910-988-1804

APPLICANT: Same Mailing Address: _____

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone #: _____

PROPERTY LOCATION: Subdivision: Crestview Ests. Lot #: 1107 Lot Size: .36 AC

State Road #: 1115 State Road Name: Buffalo Lake Rd Map Book&Page: 2004, 1224

Parcel: 03 9587 12 0020 30 PIN: 9587-82-2691-000

Zoning: R20B Flood Zone: X Watershed: NA Deed Book&Page: 2178, 600 Power Company: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

27 W TO BUFFALO LAKE RD. TURN LEFT, APPROX 1.2 MI.
TURN LEFT INTO CRESTVIEW SUBDIVISION (CRESTHAVEN DR.)
IMMEDIATE LEFT ONTO CLIFFSIDE CT, RIGHT ONTO CRYSTAL SPRING DR.
1/2 MI HOUSE ON LEFT.

PROPOSED USE:

(Include Bonus room as a bedroom if it has a closet)

Circle:

- SFD (Size x) # Bedrooms # Baths Basement (w/wo bath) Garage Deck Crawl Space / Slab
- Mod (Size x) # Bedrooms # Baths Basement (w/wo bath) Garage Site Built Deck ON Frame / OFF
- Manufactured Home: SW DW TW (Size x) # Bedrooms Garage (site built?) Deck (site built?)
- Duplex (Size x) No. Buildings No. Bedrooms/Unit
- Home Occupation # Rooms Use Hours of Operation: #Employees
- Addition/Accessory/Other (Size 11.4 x 18) Use Pergola Closets in addition ()yes ()no

Water Supply: () County () Well (No. dwellings) **MUST** have operable water before final

Sewage Supply: () New Septic Tank (Complete **New Tank Checklist**) () Existing Septic Tank () County Sewer

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? () YES () NO

Structures (existing or proposed): Single family dwellings 1 exs Manufactured Homes Other (specify) 1 proposed pergola

Comments:

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>35</u>
Rear	<u>25</u>	<u>104</u>
Closest Side	<u>10</u>	<u>28</u>
Sidestreet/corner lot	<u> </u>	<u> </u>
Nearest Building on same lot	<u> </u>	<u> </u>

Customer will be calling
Joe to have him meet on
site.

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.

Todd Sunday
Signature of Owner or Owner's Agent

5-10-2010
Date

****This application expires 6 months from the initial date if no permits have been issued****

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION
Please use Blue or Black Ink ONLY

George L. Lott

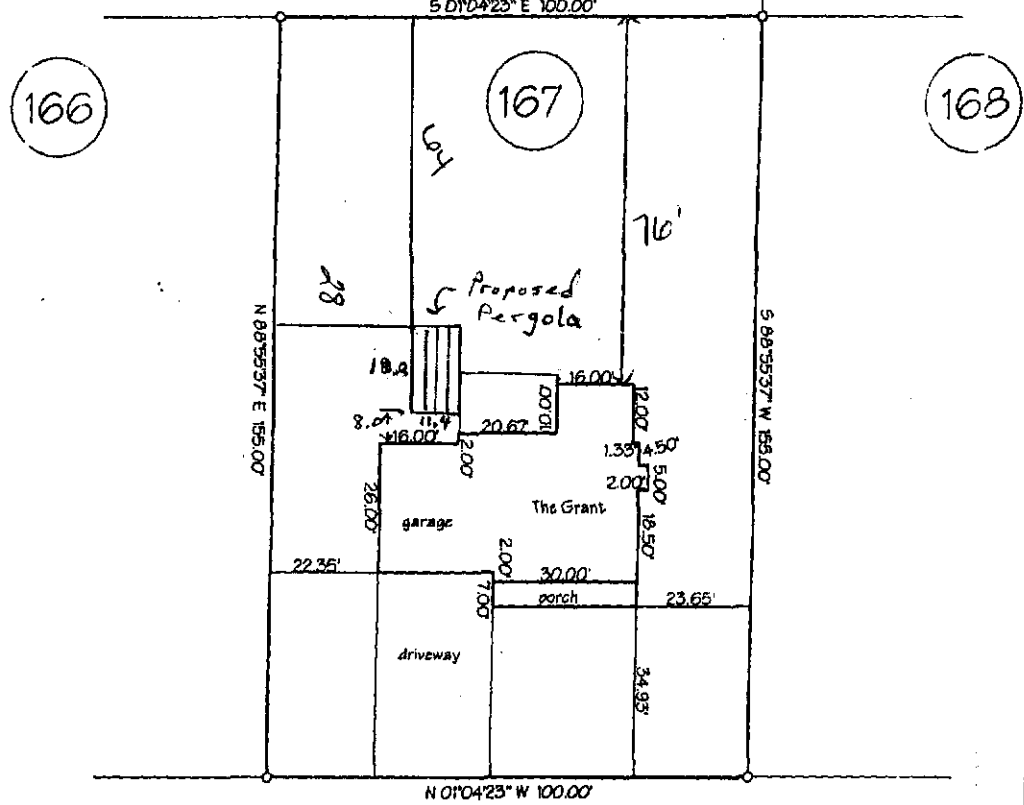
Professional Land Surveyor



126 Rowland Circle, Fayetteville, N.C. 28301
(910) 888-8659 494-2178 www.georgelott.com

165

1=40



Crystal Spring Drive 50' R/W

SITE PLAN APPROVAL

DISTRICT BA20B USE Pergola

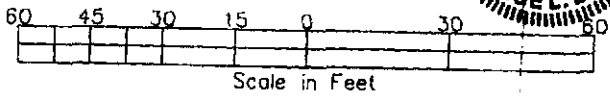
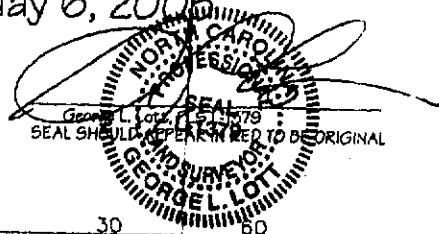
#BEDROOMS _____

Date 5-10-10 Zoning Administrator [Signature] plot plan

Regency Construction

Crestview Estates, Phase 4
Harnett County North Carolina
Scale 1" = 30' May 6, 2005

PRELIMINARY.
NOT FOR RECORDATION,
CONVEYANCES, OR SALES.



NAME: TODD SUNDAY

APPLICATION #: 1050024422

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)

910-893-7525 option 1

CONFIRMATION # _____

- Environmental Health New Septic System Code 800**
 - 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 undergrowth to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
 - **Call No Cuts to locate utility lines prior to scheduling inspection: 800-632-4949 (This is a free service)**
 - After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection: **Please note confirmation number given at end of recording for proof of request.**
 - Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
- Environmental Health Existing Tank Inspections Code 800**
 - Follow above instructions for placing flags and card on property.
 - Prepare for inspection by removing soil over door as diagram indicates. Loosen trap door cover. (Unless inspection is for a septic tank in a mobile home park)
 - After preparing trapdoor call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. **Please note confirmation number given at end of recording for proof of request.**
 - Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

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 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?
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.

Todd Sunday
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5-10-2010
 DATE

HTE # 05-500 12237

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

18095

OPERATIONS PERMIT

Name: (owner) Regency Homes New Installation Septic Tank Repair

Property Location: SR# 1115 Nitrification Line Expansion
Subdivision CRESTVIEW Lot # 167 Tax ID # _____ Quadrant # _____

Contractor: Ted Brown Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other Tree Chips

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 240 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet Date: 12-13-05

PERMIT NO. 22131 Inspected by: Joe Lott

MCP-1000 513 814 9-27-05

