

Initial Application Date: _____

Application # 1050025043

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: Jeremy & Michelle Hammons Mailing Address: 15 meadow view Ct.

City: Fuquay Varina State: NC Zip: 27580 Contact # 919-649-5035 Email: jeremy0017@gmail.com

APPLICANT*: Michelle Hammons Mailing Address: 15 meadow view Ct.

City: Fuquay Varina State: NC Zip: 27580 Contact # same Email: same

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Austin Farms Lot #: 19 Lot Size: .69

State Road # Hwy 42 State Road Name: Same Map Book&Page: 2006, 766

Parcel: 050645 0005 18 PIN: 0645-08-1977.000

Zoning: RA30 Flood Zone: X Watershed: D/A Deed Book&Page: 02537 0416 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

401 North, left onto Piney Grove Wilson, left onto 42, left on oakridge Duncan, left on Twin Fields, right on meadow view

PROPOSED USE:

- SFD: (Size ___ x ___) # Bedrooms: ___ # Baths: ___ Basement(w/wo bath): ___ Garage: ___ Deck: ___ Crawl Space: ___ Slab: ___ Slab: ___
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
- Mod: (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?)
- Duplex: (Size ___ x ___) No. Buildings: ___ No. Bedrooms Per Unit: ___
- Home Occupation: # Rooms: ___ Use: ___ Hours of Operation: ___ #Employees: ___
- Addition/Accessory/Other: (Size ___ x ___) Use: Turning Bonus To Bedrooms Closets in addition? () yes () no
Attic to Bonus

Water Supply: ___ County Existing Well New Well (if of dwellings using well) ___) *MUST have operable water before final

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

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

Structures (existing or proposed): Single family dwellings: Existing Manufactured Homes: ___ Other (specify): ___

Required Residential Property Line Setbacks:	Comments:
Front Minimum _____ Actual _____	_____
Rear _____	_____
Closest Side _____	_____
Sidestreet/corner lot _____	_____
Nearest Building on same lot _____	_____

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.

Michelle Hammons
Signature of Owner or Owner's Agent

8-13-10
Date

****This application expires 6 months from the initial date if permits have not been issued****

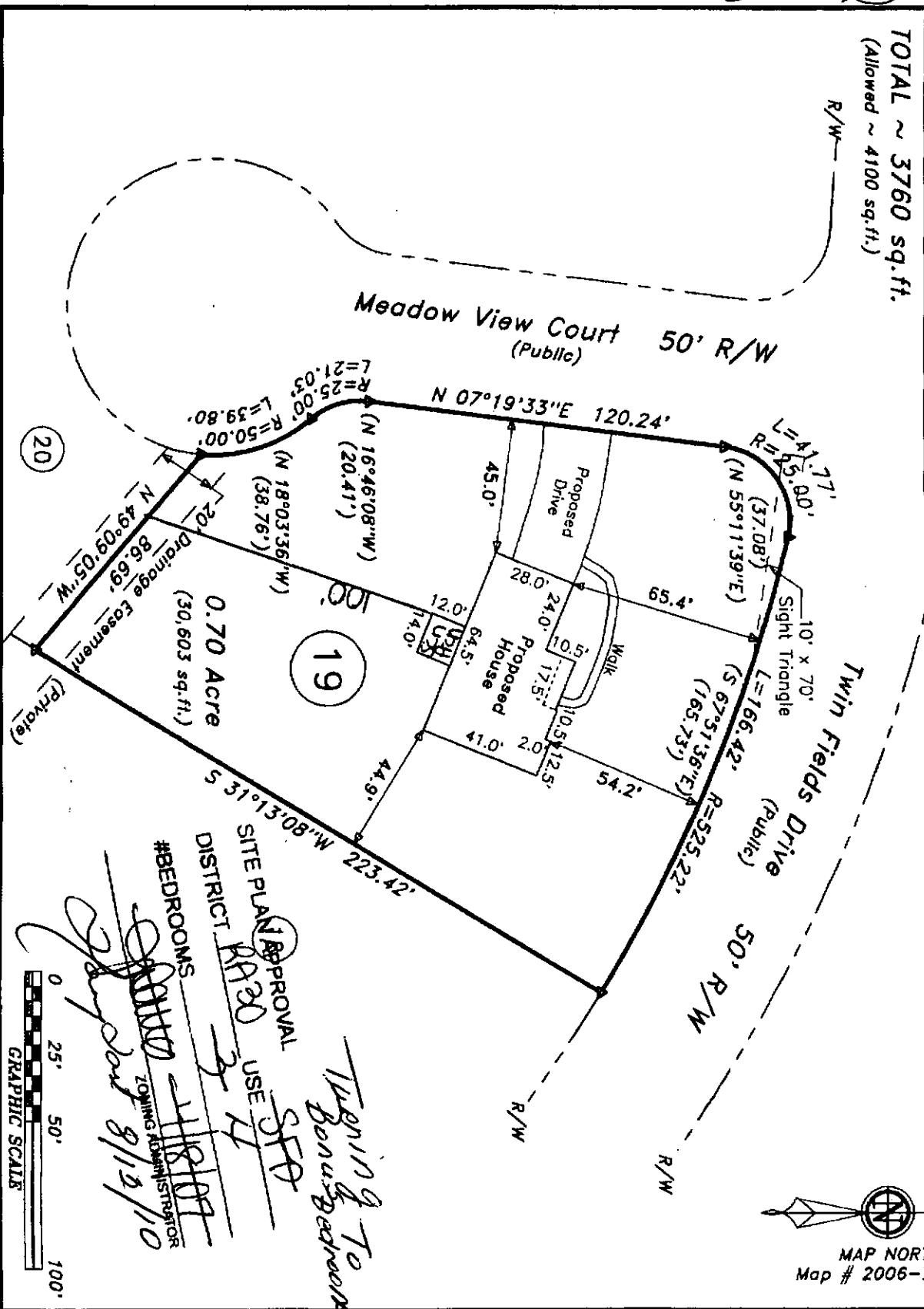
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

105043

Impervious Surface

Proposed House & Garage ~ 2268 sq. ft.
Proposed Deck ~ 168 sq. ft.
Proposed Drive/Walks ~ 1324 sq. ft.

TOTAL ~ 3760 sq. ft.
(Allowed ~ 4100 sq. ft.)



(20)

(19)

SITE PLAN APPROVAL
DISTRICT RR20 USE SFD
#BEDROOMS 3
11/18/07
ZONING ADMINISTRATOR
8/12/10

*Twinning To
Bonus Bedroom*



MAP NORTH
Map # 2006-782 & 784

Dunkridge
Twin Fields
SI

Austin
Map #
SI

EVANS

Buckhor
Scale: 1" = 5'

Survey
STI
LAND SI
870 NC 55
910-897-771

~PRELIM
- Not
This plan represents
to a lot of record
review and approvals
and inspections

NOT A

NAME: Michelle Hammons

APPLICATION #: 1050025043

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.

Michelle Hammons
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8-13-10
DATE