

SCANNED
2/8/11
DATE

Initial Application Date: 2-7-11

Application # 11-50024025

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: Bruce Axton & Amanda M Axton Mailing Address: 179 Tilden Howington Drive

City: Lillington State: NC Zip: 27546 Contact # 910-429-4750 Email: amanda.axton@gmail.com

APPLICANT*: same Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact # _____ Email: _____

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Amanda Axton Phone # 910-429-4750

PROPERTY LOCATION: Subdivision: Mamie Bell Ridge PWD 142x5 Lot #: 71 Lot Size: _____

State Road # 421 State Road Name: Old 421 Map Book & Page: 2007.256

Parcel: 13-0630-01-0029-11 PIN: 0630-55-1163

Zoning: RA30 Flood Zone: X Watershed: N/A Deed Book & Page: 2536 514 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: 421 towards Sanford, left on Old Hwy 421 approx 2 miles on left, 2nd entrance into Mamie Bell Ridge onto Tilden Howington Drive 1st house on left.

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: Computing building room Closets in addition? () yes () no

Water Supply: County Existing Well New Well (# 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: one Manufactured Homes: Other (specify):

Required Residential Property Line Setbacks: _____ Comments: _____

	Minimum	Actual	
Front	<u> </u>	<u> </u>	_____
Rear	<u> </u>	<u> </u>	_____
Closest Side	<u> </u>	<u> </u>	_____
Sidestreet/corner lot	<u> </u>	<u> </u>	_____
Nearest Building on same lot	<u> </u>	<u> </u>	_____

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.

A.M. Axton
Signature of Owner or Owner's Agent

2/7/2011
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



FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY, NC
2008 JUL 28 04:56:32 PM
BK. 2536 PG. 514-517 FEE: \$20.00
NC REV STAMP: \$418.00
INSTRUMENT # 2008012669

HARNETT COUNTY TAX ID#
B-0120-01-0009-11

7-28-08 BY [Signature]

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 418.00

Parcel Identifier No. 13063001002911 Verified by _____ County on the _____ day of _____, 20____
By: _____

Mail/Box to: REGINALD B. KELLY, PO BOX 1118, LILLINGTON, NC 27546

This instrument was prepared by: REGINALD B. KELLY, 900 S MAIN STREET, LILLINGTON, NC 27546

Brief description for the Index: _____

THIS DEED made this 28th day of July, 2008, by and between

<p style="text-align: center;">GRANTOR</p> <p>HUGH MICHAEL RAY and wife, SHELIA G. RAY a/k/a SHEILA G. RAY 3417 SPRING HILL CHURCH RD LILLINGTON, NC 27546</p>		<p style="text-align: center;">GRANTEE</p> <p>BEAU S. AXTON 179 TILDEN HOWINGTON DRIVE LILLINGTON, NC 27546</p>
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The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of LILLINGTON, Upper Little River Township, HARNETT County, North Carolina and more particularly described as follows:

BEING ALL OF LOT #71 AS SHOWN ON THAT CERTAIN SURVEY ENTITLED "MAME BELL RIDGE S/D PHASES ONE, TWO & FIVE" BY BENNETT SURVEYS, INC., DATED MARCH 15, 2007 AND RECORDED IN MAP NUMBER 2007-256, HARNETT COUNTY REGISTRY.

LOT SUBJECT TO THE 10' SEPTIC SUPPLY EASEMENT AS SHOWN ON THE ABOVE REFERENCED MAP.
The property hereinabove described was acquired by Grantor by instrument recorded in Book 1511 page 921

A map showing the above described property is recorded in Plat Book _____ page _____

NAME: Amanda Arton

APPLICATION #: 11-50026025

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 8 00

- **All property irons must be made visible.** 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.**
- **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.**
- 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 over outlet end as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- After uncovering outlet end 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.

Amanda Arton
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2/7/2011
DATE

