Initial Application Date:_	$\mathcal{B}$ .	10.	16
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Residential Land Use Application

Application #	14.5003966L	ŀ
	. CL#	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits Central Permitting

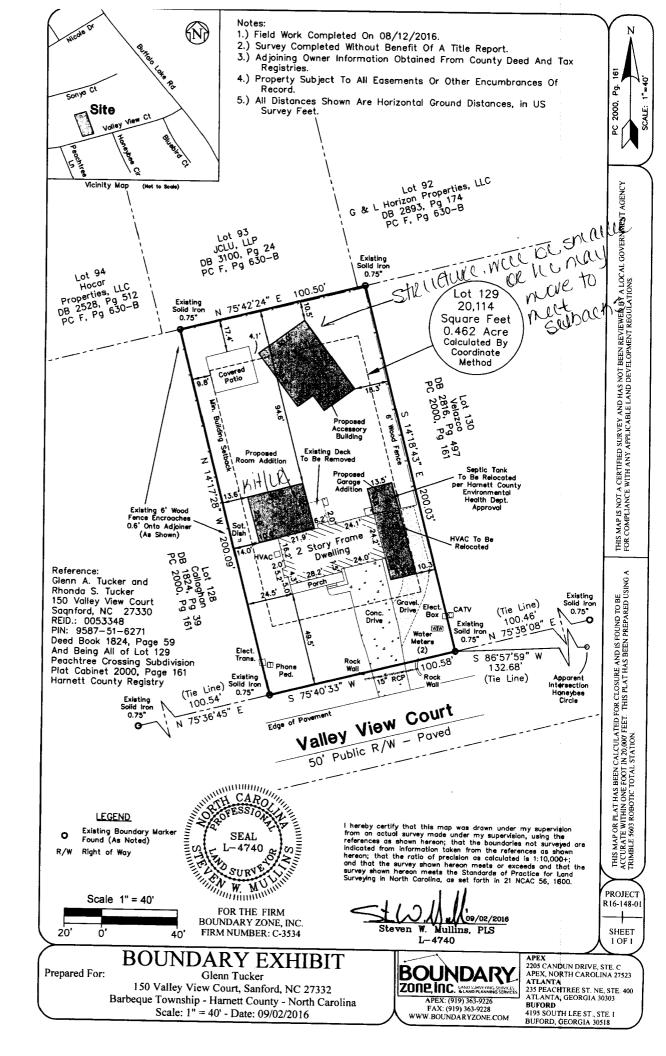
\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\*

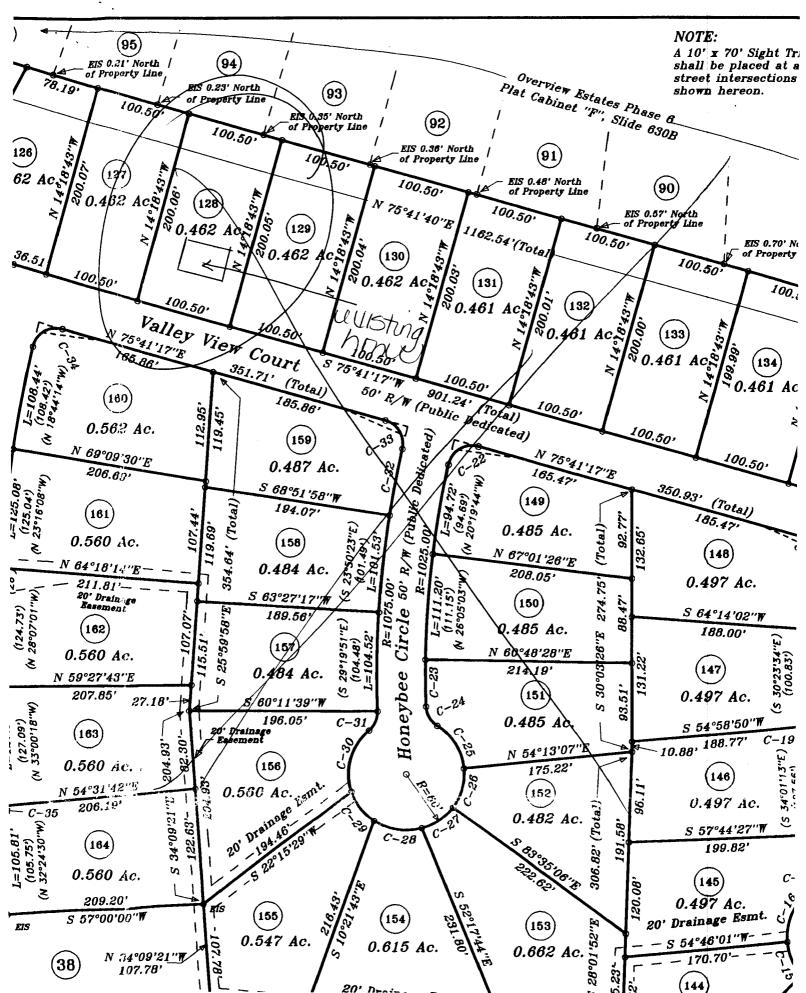
LANDOWNER: Gleun Tucker Mailing Address: 150 Ug/ly View Ct
City: Sanford State: NC zip: 17332 Contact No: 910 508 1418 Email: 9t Notes Ocharter. nc.
APPLICANT*:
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Phone #
PROPERTY LOCATION: Subdivision: Reachter Crossing Lot #: 129 Lot Size: 40AC
State Road #State Road Name: BUTIALO LOKURA)- Map Book & Page 2000, 010
Parcel: 03. 9567.06. (C20.56. PIN: 9561.51.027)
ZoningLH_L_Plood Zone: X Watershed: NH Deed Book & Page: B_LH   U Power Company*:
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
Monolithic SFD: (Sizex) # 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: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
☐ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Size 3.5.13.6) Use: Attacked 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
Does the property contain any easements whether underground or overhead () yes () no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify): UVISTOO
Required Residential Property Line Setbacks: , Comments:
Front Minimum 3 Actual 45
Rear 23 25+ CTACHURC SOVER ACCOUNTY OCICY.
Closest Side 10 10 Sidestreet/corner let 20
Nearest Building — — — — — — — — — — — — — — — — — — —

Page 1 of 2
APPLICATION CONTINUES ON BACK

03/11

PECIFIC DIRECTIONS TO 1	THE PROPERTY FROM LILLINGTON:	
		· · · · · · · · · · · · · · · · · · ·
•	an on the stands One	alling acculating such work and the specifications of plans submit
ermits are granted I agree	to conform to all ordinances and laws of the State of Norm Carc statements are accurate and correct to the best of my knowledge	olina regulating such work and the specifications of plans submit e. Permit subject to revocation if false information is provided.
ereby state that foregoing s	tatements are according and context to the section my missings.	0 8 10/16
¥	Signature of Owner or Owner's Agent	Date
r	Signature of Owner or Owner's Agent	
		eformation about the subject property, including but not limi
"It is the owner/applicant		nformation about the subject property, including but not limi tc. The county or its employees are not responsible for any within these applications.***
to: boundary imormatic	incorrect or missing information that is contained to	within these applications.***
	,	
	**This application expires 6 months from the initial date	if permits have not been issued**
		if permits have not been issued.  O CHAKFU  INAL MUNDAY RU  INAL LUS FOR  a(SO, HULLIMAY  BUT MASULU.
		10° MAKYU
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<b>₽</b> nam	ie: Olen	n Tucker		APPLICATI	16502	906
		*This application to	be filled out when applying	ng for a sentic syste	m inspection *	
<u>C</u>	ounty Health	Department Appli	cation for Improveme	nt Permit and/o	r Authorization to Cons	fruct
PERM	E INFORMATION IIT OR AUTHORIZ	IN THIS APPLICATION LATION TO CONSTRUCT tation submitted. (Completed)	IS FALSIFIED CHANGED	OR THE SITE IS AL ID. The permit is valid plete plat = without ex	TERED, THEN THE IMPROVEM I for either 60 months or without expiration)	ATTA PER
E		Health New Septic S	<i>ystem</i> Code 800	CONFIRMA	11ON #	
•	All property lines must be Place "orange	irons must be mad clearly flagged appro- e house corner flags"	le visible. Place "pink poximately every 50 feet be at each corner of the pro	etween corners. poosed structure.	each corner iron of lot. All  Also flag driveways, garages	
•	Place orange	Environmental Health	. Place flags per site plain heard in location that is e	n developed at/for easily viewed from	Central Permitting.	merty
•	evaluation to	pe periormea, inspe	ctors should be able to w	alk freely around si	it the <u>undergrowth</u> to allow ite. <i>Do not grade property.</i> 00 return trip fee may be in	
	for failure to	uncover outlet lid. n	nark house corners and	d property lines a	ou return trip fee may be in etc. once lot confirmed rea	<u>ncurred</u>
· /•	800 (after selection of the selection of	g proposed site call the call	he voice permitting syste mit if multiple permits ex of recording for proof of re	m at 910-893-7525 ist) for Environme equest.	5 option 1 to schedule and united the option 1 to schedule and united the option 1 to schedule and united to schedule and united the option 1 to schedule and united the option 2 to schedule and united the option 3 to schedule and united 3 to s	go oode
\ / F	ose Olick2G0 Nvironmental H	v or ivin to verify rest lealth Evicting Tonk	ilts. Once approved, pro Inspections Code 80	ceed to Central Pe	rmitting for permits.	
V =	Follow above	instructions for placin	g flags and card on prope	J ertu		
•	Prepare for in	ispection by removing	a soil over <b>outlet end</b> o	f tank as diagram	indicates, and lift lid straigh	hatum (i
•	DO NOT LEAV	E LIDS OFF OF SEPTION	<b>place</b> . (Unless inspection C <b>TANK</b>	is for a septic tan	k in a mobile home park)	
•	ii mulliple per	ng <b>outlet end</b> call the mits, then use code <u>f recording for proof c</u>	800 for Environmental	at 910-893-7525 Health inspection.	option 1 & select notification Please note confirmation	ı permit number
• SEPTI	Uşe Click2Gov	v or IVR to hear result	ts. Once approved, proce	ed to Central Pern	nitting for remaining permits.	,
If apply	ying for authorizati	ion to construct please in	dicate desired system type(s)	: can be ranked in or	der of preference, must choose or	ne.
	Accepted	{_}} Innovative	{}} Conventional	{}} Any	)	
{}}	Alternative	{_}} Other		/ /		
The app question	olicant shall notify n. If the answer is	the local health departs "yes", applicant MUS	ment upon submittal of this TATTACH SUPPORTIN	application if any of IG DOCUMENTAL	f the following apply to the pro FION:	perty in
{}}YE	1	/	any Jurisdictional Wetlands	1		
{}}YE	,	, ,	n <u>irrigation system</u> now or	l l		
{}}YE		1	ing contain any <u>drains</u> ? Ple	1		<u> </u>
{}}YE	s {} NO/	Are there any existing	wells, springs, waterlines	or Wastewater System	ms on this property?	

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)