Mittial Application Date: 210016	Application #16500402
COUNTY OF HARNETT RESIDENTIAL	- 12 MES 전 전 전 2017 (2017) 1 MES 전 전 2017 (2017) 1 MES (2017) 2 MES (2017) 1 MES (2017) 1 MES (2017) 2 MES (2017)
	893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/pen
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE P	
LANDOWNER: James Havtman Mailing Address	ess: 245 Briar Creek Ln
City: Coats State: N C Zip: 2752 Contact No: 40	75098683 Email:
APPLICANT*: Mailing Address:	
City: State: Zip: Contact No: *Please fill out applicant information if different than landowner	Email:
CONTACT NAME APPLYING IN OFFICE: SQML	Phone #
PROPERTY LOCATION: Subdivision:	Lot #: Lot Size:
State Road #State Road Name: Fleming Ro	
Parcel: 070690 0027 PIN: 060	90 32 4358.000
Zoning: COATSFlood Zone: X Watershed: NA Deed Book & Page: 30	
*New structures with Progress Energy as service provider need to supply premise number	
	"Offi Flogless Energy.
PROPOSED USE:	
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): (Is the bonus room finished? () yes () no w/ a closet?	
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) C	**
☐ 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 22x 42) Use: Turn 2nd Story	OF Barn Closets in addition? (X) yes (_) no
Water Supply: X 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 hur	ndred 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):_Barn []
Required Residential Property Line Setbacks: Comments:	Confirm# 09168
	owner with perk test
Rear 25 25+ time and	date

Nearest Building A A Page 1 of 2

Closest Side

Page 1 of 2
APPLICATION CONTINUES ON BACK

03/11

just past Bar Briar Creek Ln is driveway on R to Barr	Is 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 a state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provi	421 to 27 to McLamb
is driveway on R to Barr	s 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	Just past Boar Creek Ln
O	s 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	is driveway on R to Barn
	s 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	 O
	s 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	
James Darling State trial to regoing state that the sest of my months		 Signature of Owner or Owner's Agent Date

It is the owner/applicants 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.

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

USE

NOT FOR LEGAL

	-	
NAM	E:	

	XXXX I	r w.	~ + +	TIVA	 	
Δ.	$\nu \nu$		CA		# .	

		This application to be filled out when applying for a septic system inspection.
Cou	nty Health	Department Application for Improvement Downst and the Author
		definition. (Complete site pial) = 00 monins: (omniete nigt = without expiration)
1 1	210-033-134	CONFIDMATION #
Env	All property	Health New Septic System Code 800
	lines must be	irons must be made visible. Place "pink property flags" on each corner iron of lot. All property
		ologity nadded applicatiliately every out that hatwach corners
ried.	out huildings	e house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,
	out buildings,	Swiffing pools, etc. Fidde lidds per site plan developed at/for Central Pormitting
	If property is	Environmental Health card in location that is easily viewed from road to assist in locating property.
(evaluation to	thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil be performed. Inspectors should be able to walk freely around site. <i>Do not grade property</i> .
	All lots to be	e addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
1	for failure to	uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
• /	aller preparin	ly proposed site call the voice permitting system at 910-893-7525 option 1 to appendix and use
	(anter ser	ecting notification permit if multiple permits exist) for Environmental Health inspection. Places note
	ommination	lumber given at end of recording for proof of request
• (Jse Click2Go	or IVR to verify results. Once approved, proceed to Central Permitting for permits
CIIVI	ronmentai n	lealth Existing lank Inspections Code 800
•	-ollow above	instructions for placing flags and card on property
• F	repare for in	aspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if
-	vossible) allu	men put ild back in place. (Unless inspection is for a septic tank in a mobile home park)
	O NOT LEAV	E LIDS OFF OF SEPTIC TANK
if	multiple per	ng outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
	iven at end o	mits, then use code 800 for Environmental Health inspection. Please note confirmation number frecording for proof of request.
• [Jse Click2Go	v or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
JEI IIC		
If applying	g for authorizat	ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{_}} Acc	epted	{}} Innovative {≤} Conventional {} Any
	-21-6-14-20-20-20-20-20-20-20-20-20-20-20-20-20-	
		{}} Other
The applic	ant shall notify	y the local health department upon submittal of this application if any of the following apply to the property in
question.	If the answer is	s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
}YES		Does the site contain any Jurisdictional Wetlands?
}YES	(≯) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
}YES	{	Does or will the building contain any drains? Please explain
X}YES	{} NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property? County water To
}YES	{ ≤ } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property? County water To 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.
Have Read	This Applicat	
rate Official	le Are C	ion 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.
Understan	d That I Am So	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Company

ation And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

ZI NOV 16 DATE

ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. Also, in order to receive a Privilege License from the Town of Coats to open a business, you must have a valid Zoning Permit, along with all applicable inspections from Harnett County,

Permit No. 101113 -1	Data: 10-11-11	3 Fac. 26	2 D CT 11 20:3
P. Lint	_ Date. <u>// // // // // // // // // // // // //</u>	5 Fee: 55	Residential/Agricultur
Parcel ID*:		Area Zoned As:_	Residential Markeuttu
APPLICA	ANT:		PROPERTY OWNER:
Name (Print) Tames	D. Hartman	Name _	Demes D. Hartman
Address		Address _c	295 BRISE CKILDO.
City, State		City, State	Costs, NC- 27521
Zip Code		Zip Code _	27521
Phone #		Phone #	910-897-6915
Location of Property:	IN-TOWN	ЕТЈ	ETJ (contiguous)
			Ture
PROPOSED USE OF PROPE		U	
Single Family Dwelling: [] Multi Family Dwelling: [] Mobile Home (single lot): [] Mobile Home Park: [] Business: [] Others (specify):	# Rooms: # Be # of Units: #Be Single wide: Do Section 16, Zoning Ordinan Total # of employees per of	edrooms (per unit) ouble Wide: nce must apply	Square Feet: Square Feet (per unit) Type of business
[14] Existing structure:	Renovate:	Addition:	Demolish:
WATER AND SEWER SUPP	LY:		
Water: Sewer:	[] Private [] I		
Applicant: I certify that all of best of my knowledge. False in			n is true, complete, and accurate to the plication.
Signature:	Dartne	_	Date: 10-11-13
Notes: D	ZONING ADMINIST		VLY
Notes: ADDING	ROAD TO BA	3121	_
	Approved:	Denied:	
Zoning Administrator:	APPROVED	Dat	se: 19/11/17
	Post Office Box 675 • Co	oats, North Carol	ina 27521

(010) 000 5100 . (010) 000 0000 0

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JFORBES Type: CP Drawer: 1
Date: 11/21/16 51 Receipt no: 157586

Year Number Amount 2016 50040218 69357 *UMASSIGNED COATS, NC 27521 B4 BP - ENV HEALTH FEES \$750.00

NEW FANK

JAMES HARTMAN

Trans date: 11/21/16 Time: 11:16:30

** THANK YOU FOR YOUR PAYMENT **

Year Number 2015 10040818 6357 *NMASSIGHED CGATS, NC 27521 84 BP - ENV HEALTH FEES

6258.88

MEN ANK

JAMES HAKTHAM

Tender detail CK CHECK FAYMEN Total tendered Total payment \$750.00 \$750.00 \$750.00

Trans date: 11/81/16 Time: 11:16:38

** THAMK YOU FOR YOUR PAYMENT **