nitial Application Date:	12/15/16

Application # 10500 40387

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

	OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN S	
LANDOWNER: TANKS & HESSY WILL	Mailing Address: 1885 OVE	PHILLS KD
City: State: W	-Zip: <u> </u>	ail:
ADDICANT JONA HAN HALL	Mailing Address: 3 483 CAMPLON I	de la companya della companya della companya de la companya della
City: Savas State State Please fill out applicant information if different than landowner	Zip 21932 Contact No: 919/935-81603 Em	ail: jhart 8077@ yaho
CONTACT NAME APPLYING IN OFFICE:	y STEPHENS Phone #	910/890-4777
PROPERTY LOCATION: Subdivision:		Lot #: Lot Size: 7, 35
State Road # State Road Name:	941 OVERHILLS KD	Map Book & Page:/
Parcel: 010525 0046	PIN: 0535-08-4339.000	
Zoning: A 26 Flood Zone: Watershed:	Deed Book & Page: <u>U58 / 892</u> Power	Company*:
	er need to supply premise number	
PROPOSED USE:		
	s: Basement(w/wo bath): Garage: Deck:	Crawl Space: Slab: Monolithic
	ed? () yes () no w/ a closet? () yes () no (if y	
	s Basement (w/wo bath) Garage: Site Built ed? () yes () no Any other site built additions? (_	
☐ Manufactured Home:SWDWTW (Siz	zex) # Bedrooms: Garage:(site b	ouilt?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	
□ Home Occupation: # Rooms: Use:	: Hours of Operation:	#Employees:
Addition/Accessory/Other: (Size 23_x24_) Use	BACK DELK W/ ROOF AND POOF TO EXISTING FROM	Closets in addition? () yes () no
Water Supply: County Existing Well	New Well (# of dwellings using well) *Mus	st have operable water before final
Sewage Supply: New Septic Tank (Complete Che	necklist) Existing Septic Tank (Complete Checklist	t) County Sewer
Does owner of this tract of land, own land that contains a	a manufactured home within five hundred feet (500') of tr	act listed above?(\(\sqrt{\sq}}}}}}}}} \sqrt{\sq}}}}}}}}}}}}}} \simptimes \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}} \simptimes \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}} \simptimes \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt
Does the property contain any easements whether under	erground or overhead () yes () no	
Structures (existing or proposed): Single family dwelling	s: Manufactured Homes:	Other (specify):
Required Residential Property Line Setbacks:	Comments:	
Front Minimum > 35' Actual		1
Rear > 45'		
Closest Side > /6'		
Sidestreet/corner lot		
Nearest Building		
on same lot		02/44

Residential Land Use Application

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^{***}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**

NAME: Tonathan fourt

}YES

{ }YES

NO NO

APPLICATION #: 40387

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) CONFIRMATION # 910-893-7525 option 1 Environmental Health New Septic SystemCode 800 All property irons must be made visible. Place "pink property flags" on each corner iron of lot. 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 outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park) DO NOT LEAVE LIDS OFF OF SEPTIC TANK 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. { } Conventional } Innovarive {__}} Any {__}} Accepted } Other { Alternative 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: Does the site contain any Jurisdictional Wetlands? {__}}YES 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. { }YES Are there any existing wells, springs, waterlines or Wastewater Systems on this property? { }YES Is any wastewater going to be generated on the site other than domestic sewage? { }YES Is the site subject to approval by any other Public Agency? { }YES

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 Accessing So That A Complete Site Evaluation Can Be Performed.

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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Are there any Easements or Right of Ways on this property?

Harnett County GIS



Back Deck 12x24

SITE PLAN APPROVAL BOCK
DISTRICT A-20 USE DECK
#BEDROOMS
12-15-10
Zoning Administrator

Print this page

Harnett COUNTY WORTH CAROLINA

Legal Description:

7.32 ACRES HONEYCUTT

Harnett County GIS

PID: 010525 0046

PIN: 0535-03-4229.000

REID: 0027444

Subdivision:

Deeded Acreage: 0 ac

Total Acreage: 7.34574099 ac

Account Number: 101073000

Name 1: PRICE JAMES D

Name 2: PRICE PEGGY SUE P

Owner Address 1: 1885 OVERHILLS RD

Owner Address 2: Owner Address 3:

City, State, Zip: LINDEN, NC, 28356-0000

Building Count: 1
Township Code: 01
Fire Code: FR10

Property Address: 1885 OVERHILLS RD

Parcel Building Value: \$24210
Parcel Outbuilding Value: \$6800

Parcel Land Value : \$35700

Parcel Special Land Value : \$0

Total Value: \$66710

Parcel Deferred Value: \$0

Total Assessed Value: \$66710

Legal Land Units , Unit Type : 7.32, AC

Tax Data Last Modified:

Calculated Land Units / Type: 0 ac

Neighborhood: 00101

Actual Year Built: 1940

TotalAcutalAreaHeated: 1040 Sq/Ft

Sale Month and Year: 1 / 1900

Sale Price: \$0

Deed Book & Page: 658-0892

Deed Date:

Plat Book & Page: -

Instrument Type:

Vacant or Improved:

QualifiedCode: X

Transfer or Split:

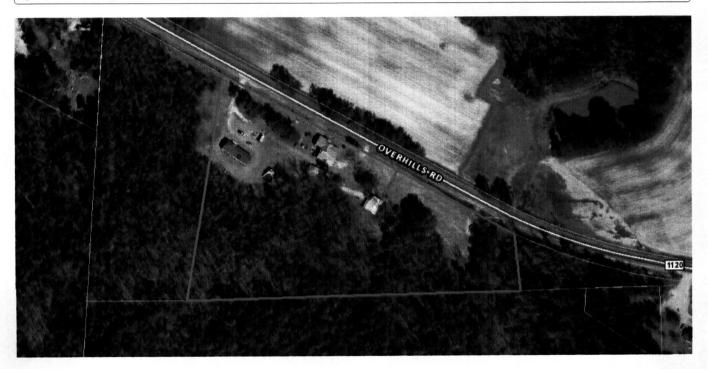
Prior Building Value: \$28680
Prior Outbuilding Value: \$0
Prior Land Value: \$22670

Prior Special Land Value : \$0

Prior Deferred Value: \$0

Prior Assessed Value: \$51350

Prior Land Units: 7.32 ac



Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application #

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Application for Residential Building and Trades Permit

Owner's Name /HLAN BAIN	Date 12/15/10
Site Address P41 OVAL 4145 45 LINGEN, 1 Directions to job site from Lillington TAKE 810-8, TA	Phone 910/494-40
Directions to job site from Lillington TAKE 3.10-9, The	UPN LEFT ONTO OVERHILLS
1941 ON THE RICHT	
Subdivision Alac	Lot
Proposed Work 12 21 Plan Proposed Work	Parco Hard 10' X/8'
Description of Proposed Work Axay Back Dock W/S	m2 Crawl Space Slab
General Contractor Inform	
I.A. HAVE CONSTRUCTION / REMODERING	919-935-2603
Building Contractor's Company Name	Telephone
Building Contractor's Company Name 3483 CAMERON DE, SANFORD NC	inart 8077 @ yahor
1001000	Email Address
77400	
icense # Electrical Contractor Infor	mation
Description of Work Service	SizeAmps T-PoleYesN
Electrical Contractor's Company Name	Telephone
Address	Email Address
License # Mechanical/HVAC Contractor	Information
Description of Work	
Description of Work	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License # Plumbing Contractor Info	rmation
Description of Work	# Battis
Plumbing Contractor's Company Name	Telephone
Plumbing Contractor's Company Name	
Address	Email Address
7.00.000	
License #	
Insulation Contractor Info	rmation
O Address	Telephone
Insulation Contractor's Company Name & Address	relephone

I hereby certify that I have the authority to make necessary application that the application is correct and that-the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors site plan number of bedrooms building and trade plans. Environmental Health permit changes or proposed use changes. I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule

9-165	12/15/16	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	A CANDING STATE OF THE PARTY OF

Affidavit for The undersigned applicant being the	or Worker's (Compensation N C G S 87-14
General Contractor	Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties set forth in the permit	of perjury that th	ne person(s) firm(s) or corporation(s) performing the work
Has three (3) or more emplo	yees and has ol	otained workers compensation insurance to cover them
Has one (1) or more subcont	tractors(s) and h	has obtained workers compensation insurance to cover
Has one (1) or more subcont covering themselves	tractors(s) who h	has their own policy of workers compensation insurance
Has no more than two (2) em	ployees and no	subcontractors
Department issuing the permit may to issuance of the permit and at any	require certification	sought it is understood that the Central Permitting tes of coverage of worker's compensation insurance prior permitted work from any person firm or corporation STEUCHION Demonstration Date 10/15/16
Sign w/Title	45	OUNER Date 12/15/16

Inspections for SFD/SFA

Final_ V

Crawl	Slab	Mono	Basement	
Footing	Footing	Plum Under Slab	Footing	
Foundation	Foundation	Ele. Under Slab	Foundation	
Address	Address	Address	Waterproofing	
Open Floor	Slab	Mono Slab	Plum Under slab	
Rough In	Rough In	Rough In	Address	
Insulation	Insulation	Insulation	Slab	
Final	Final	Final	Open Floor	
	,		Rough in	
		Insulation		
		Final		

Additions / Other
Footing / Adding Roof to exist front
Foundation / Porch and Adding A Careved
Slab _ Mono _ Open Floor / Rough In _ Insulation