Initial Application	Date:	01	23	11	7
		- 1			

Residential Land Use Application

Application # _	1750041703
	CU#

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

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

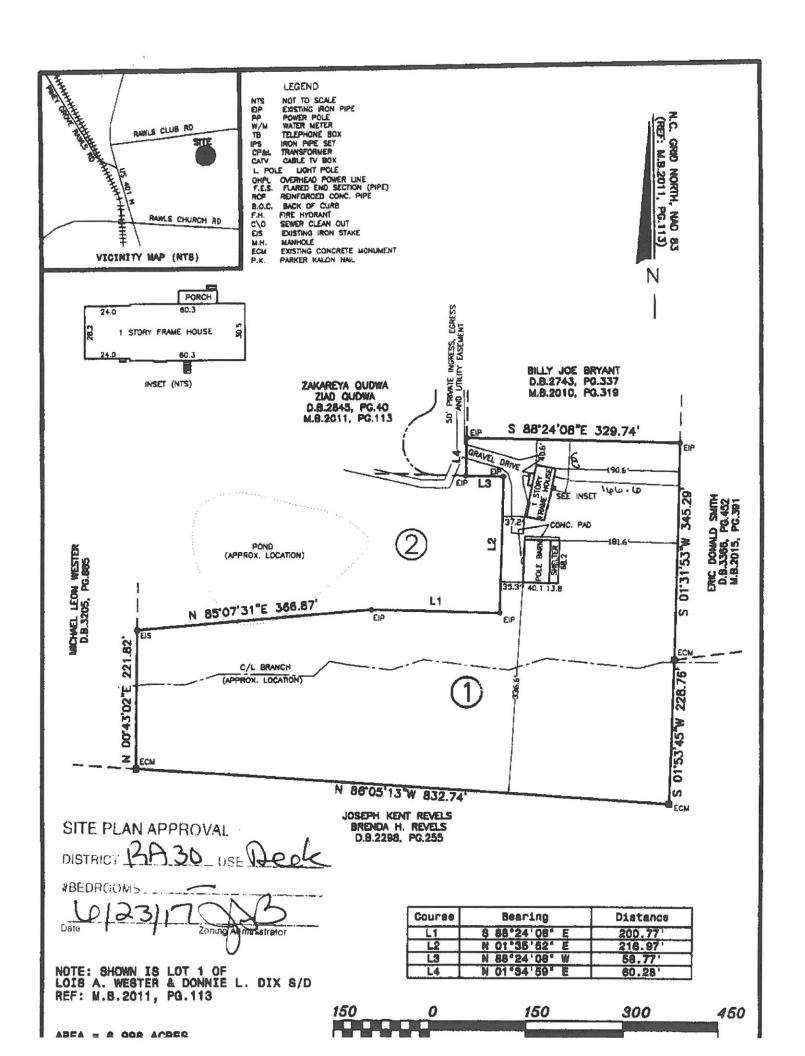
03/11

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
LANDOWNER Robert Selin Mailing Address: 450 Rawls Club Rd
City: Fugury - Varing State: NC zip: 275 Contact No: 919 418 2363 mail:
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE:Phone #
PROPERTY LOCATION: Subdivision: State Road # 1447 State Road Name: Rawls Club Rd Map Book & Page 2011 113 Parcel: 08 0055 0068 03 PIN: 0655-61-7330.000 Zoning Alo Flood Zone: X Watershed: AA Deed Book & Page: 291435 Power Company*: *New structures with Progress Energy as service provider need to supply premise number
New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE: Menolithic
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Sla
☐ 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: #Employees:
Addition/Accessory/Other: (Size 24' x 24') Use: DecK Closets in addition? () yes (X) 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 of proposed): Single family dwellings: 1 26+ Manufactured Homes: Other (specify): 1 1012ck
Required Residential Property Line Setbacks: Comments:
Front Minimum Actual 35
Rear 25 100 0
Closest Side 10' 40
Sidestreet/corner lot
Nearest Building

SPECIFIC DIRECT	TIONS TO THE PROPERTY FROM LILLINGTON:	401 North to	Rawls Club Rd	
turn r	ight on Rawls club Rd	about a mile o	on right updirt	
	Gray house		,	
	,			
If permits are grante I hereby state that fo	ed I agree to conform to all ordinances and laws of to oregoing statements are accurate and correct to the accurate and correct to the correc	best of my knowledge. Permit su	ing such work and the specification. bject to revocation if false informati	s of plans submitted. on is provided.
	Signature of Owner or Owner's Age	nt	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**



NAME:	APPLICATION #;	
County Health De IF THE INFORMATION IN PERMIT OR AUTHORIZAT depending upon documentation 910-893-7525 of Environmental Healt • All property irrelines must be cle • Place "orange he out buildings, sy • Place orange En • If property is this evaluation to be • All lots to be as for failure to un • After preparing pages (after select confirmation num • Use Click2Gov of Environmental Health (after property) and the	This application to be filled out when applying for a septic system inspection.* Partment Application for Improvement Permit and/or Authorization THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE FION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months on submitted. (Complete site plan = 60 months; Complete plat = without expiration) Patth New Septic System Code 800 Cons must be made visible. Place "pink property flags" on each corner iron early flagged approximately every 50 feet between corners. Pouse corner flags" at each corner of the proposed structure. Also flag drivewed wimming pools, etc. Place flags per site plan developed at/for Central Permittin invironmental Health card in location that is easily viewed from road to assist in ckly wooded, Environmental Health requires that you clean out the undergroup performed. Inspectors should be able to walk freely around site. Do not grade addressed within 10 business days after confirmation. \$25.00 return trip for incover outlet lid, mark house corners and property lines, etc. once lot corpoposed site call the voice permitting system at 910-893-7525 option 1 to set ting notification permit if multiple permits exist) for Environmental Health inspections or IVR to verify results. Once approved, proceed to Central Permitting for permitting Tank inspections. Code 800 Structions for placing flags and card on property. Patth Existing Tank inspections. Code 800 Structions for placing flags and card on property. Poetion by removing soil over outlet end of tank as diagram indicates, and en put lid back in place. (Unless inspection is for a septic tank in a mobile hole.)	en to Construct E IMPROVEMENT his or without expiration of lot. All propert ays, garages, decks ng. I locating property. With to allow the so de property. We may be incurre entirmed ready, hedule and use code ection. Please note mits.
 DO NOT LEAVE After uncovering if multiple perm given at end of r Use Click2Gov of 	LIDS OFF OF SEPTIC TANK p outlet end call the voice permitting system at 910-893-7525 option 1 & selectits, then use code 800 for Environmental Health inspection. Please note of ecording for proof of request. or IVR to hear results. Once approved, proceed to Central Permitting for remains.	ect notification permi confirmation numbe
SEPTIC If applying for authorization	n 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 local health department upon submittal of this application if any of the following a 'yes'', applicant MUST ATTACH SUPPORTING DOCUMENTATION:	pply to the property in
{_}}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.	
()YES () NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this prope	rty?
[_{YES () NO	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 (_) 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	on And Certify That The Information Provided Herein Is True, Complete And Correct. A	uthorized County And
State Officials Are Granted	Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Appli	cable Laws And Rules.
I Understand That I Am Sol	ely Responsible For The Proper Identification And Labeling Of All Property Lines And C	orners And Making
	A Complete Site Evaluation Can Be Performed.	6/21/17
PROPERTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	DATE