| Initial Application Date:_ | 7/ | 17 | 17 |
|----------------------------|----|--------|----|
| , , | 7 | \neg | |

Residential Land Use Application

| Application # | 17-50041856 |
|---------------|-------------|
| ADDITION | 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 |
|--|
| "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" |
| City: Luquay Varina State: M. Zip: 22526. Contact No. (918) 42 7 6 746 5 700 |
| City: |
| APPLICANT*: Same Mailing Address: |
| State: Zio: Contact No. |
| *Please fill out applicant information if different than landowner Email: |
| CONTACT NAME APPLYING IN OFFICE: Phone # |
| |
| PROPERTY LOCATION: Subdivision: To Hilliard Estate Lot #: 3 Lot Size: |
| State Road # 145 V State Road Name: 17 11 0 170 |
| Parcel: |
| Zoning: P4:30 Flood Zone: Watershed: Deed Book & Page: 1(27 / 253 Power Company*: |
| *New structures with Progress Energy as service provider need to supply premise numberfrom Progress Energy. |
| PROPOSED USE: |
| |
| O 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: (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: SW DW TW/Size |
| 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: #Empleyees |
| #Employees: |
| Addition/Accessory/Other: (Size 10 x12) Use: dell' to surrend in parch 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 |
| Does the property contain any easements whether underground or overhead () yes (_/) no |
| Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify): |
| Required Residential Property Line Setbacks: Comments: Changing 10' x 12' Again into |
| Front Minimum 35 Actual Comments: Closed in Dorch |
| Rear 25 |
| Closest Side 10 8601 |
| Sidestreet/corner lot 20 |
| Nearest Building (0 on same lot |

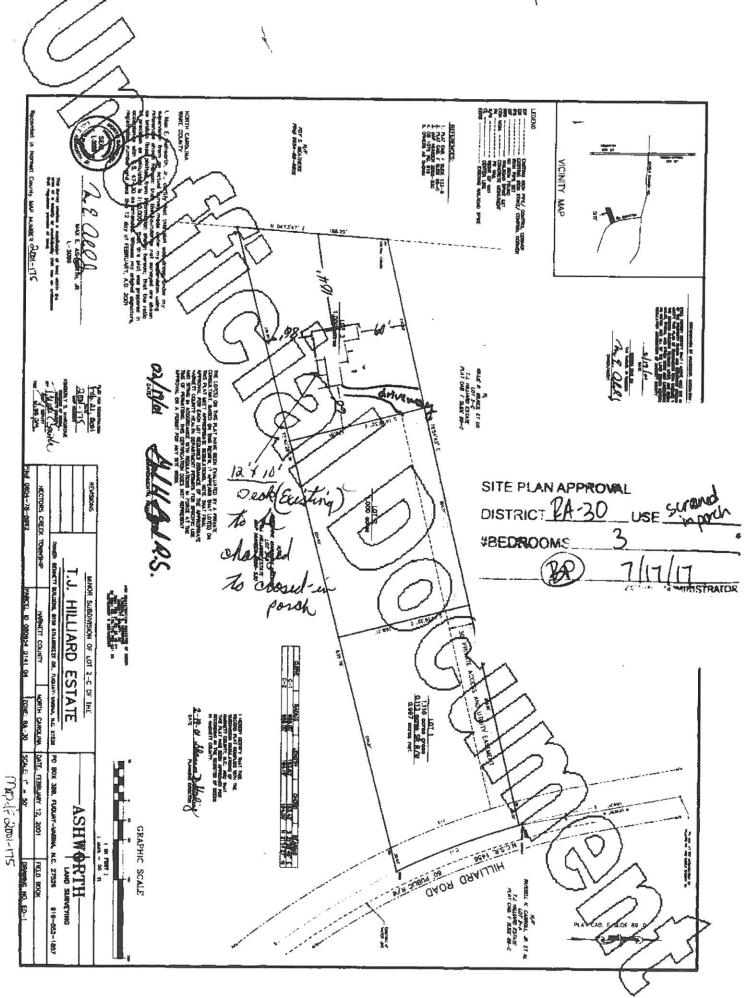
Page 1 of 2

APPLICATION CONTINUES ON BACK

| SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 Morth toward Fugury Varia |
|---|
| maybe 10 miles turn right on Rowls Church Rood I mile turn right on Billard Road 12 mile turn right on Elle Lane |
| right on Hillard Road 1/2 mile turn right on Elle Lane |
| d , d |
| |
| |
| |
| |
| If permits are granted 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. |
| ulade Vuncannon 7/17/14 |
| 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



NAME: Whole Daviel Jones

APPLICATION #:

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 & D

Environmental Health New Septic System Code 800

- 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 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 | | g portition |
|--------------------|-------------------------------------|--|
| If applying | for authorization | on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. |
| {}} Acc | epted | {} Innovative {} Conventional {} Any |
| {}} Alte | rnative | {}} Other |
| The application. I | ant shall notify f the answer is | the local health department upon submittal of this application if any of the following apply to the property in "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 | on And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And |
| State Officia | ls Are Granted | Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules |
| I Understand | I That I Am So | ely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making |
| The Site Acc | essible So That | A Complete Site Evaluation Can Be Performed. |
| | ade Vu | nesuson |
| PROPERT | Y OWNERS (| DR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) |