Initial Application Date:_	1/2/17
Initial Application Date:_	10:00:11

Application #	M 500 42654

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

on same lot

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

TA RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION** Mailing Address: 1434 A+Kins Rd.
Contact No: _____ Email: 61 y 672 @ 94hoo, Com State: NC Zip: 27526 Contact No: _ _ Mailing Address:_ APPLICANT[®] __ Contact No: _____ Email: ____ State: City: *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: from Progress Energy. *New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: Monolithic 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: (Size ____x___) # 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___x___) # Bedrooms: ___ Garage:__(site built?___) Deck:__(site built?___) Duplex: (Size ___x___) No. Buildings: _____ No. Bedrooms Per Unit: ____ Hours of Operation: Home Occupation: # Rooms: _____ Use:___ \Box 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 (\underline{V}) 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: Front Rear Closest Side Sidestreet/corner lot Nearest Building

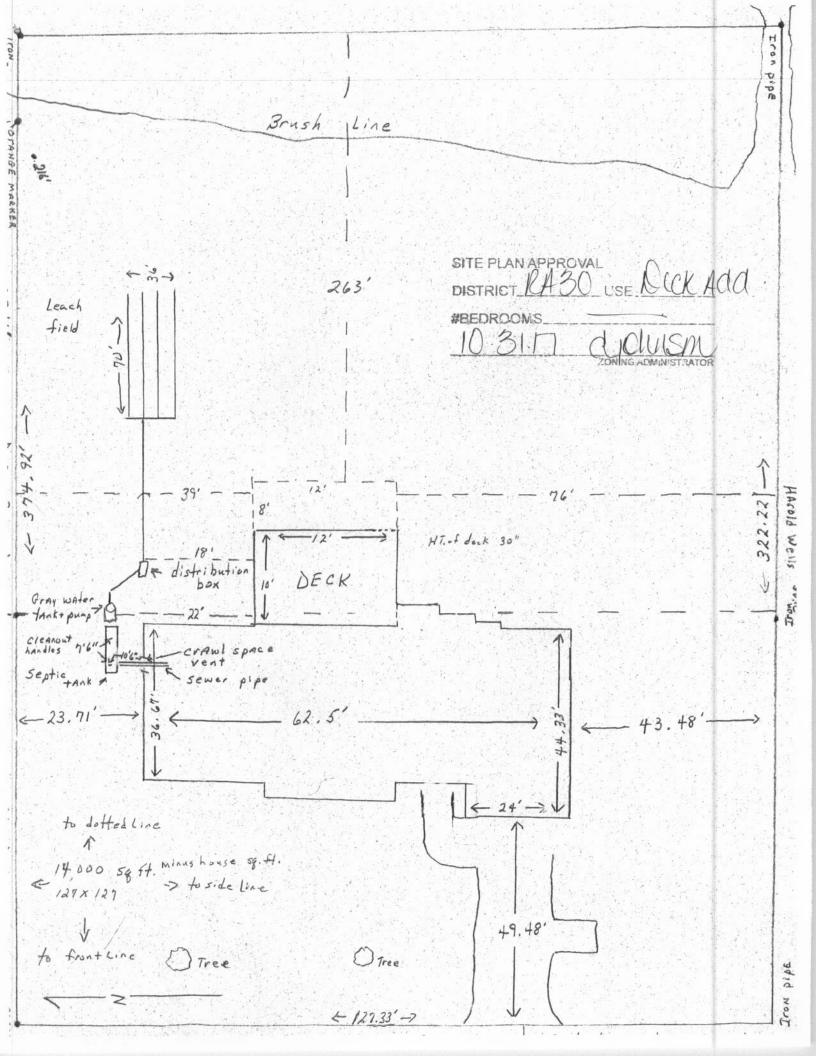
> Page 1 of 2 **APPLICATION CONTINUES ON BACK**

03/11

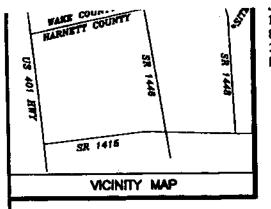
CIFIC DIRECTIONS	TO THE PROPERTY FROM LILLINGTON:	
	,	
	•	
mits are granted I aq by state that forego	gree to conform to all ordinances and laws of the State of North C ing statements are accurate and correct to the best of my knowle	arolina regulating such work and the specifications of plans s dge. Permit subject to revocation if false information is provid
	Signature of Owner's Agent	10/30/2017 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**



ARTERIA SECURIOR AND ARTERIA



LICHAE & CHKMOE 114 SQ.FT. - WALK & STEPS 830 SQ.FT. - DRIVEWAY 3468 TOTAL SQ.FT. - PROPUSED COVERAGE PERCENTAGE OF LOT COVERED - 7.5%

H

DΕ

BEING LOT 4 OF MINOR SUBDIVISION FOR FISH BROTHERS, INC. RECORDED IN MAP NUMBER 2015-182.

AREA COMPUTED BY COORDINATE METHOD. NOTE:

RECORDED MAP HAS BEEN PREVIOUSLY TIED TO GRID. NOTE:

NOTE: THIS PROPERTY IS SUBJECT TO EASEMENTS AND RESTRICTIONS OF RECORD.

PRELIMINARY PLAT- NOT FOR RECORDATION, CONVEYANCES, OR SALES.

"I. Danny D. Williams, certify that this map was dry the boundaries not surveyed are indicated as de Number 2015-182 that the ratio of precision or that this map neets the requirements of The Starveying in North Carolina (21 NCAC 36,1680).

Tries 22900 day of DCTOBER, 2015.

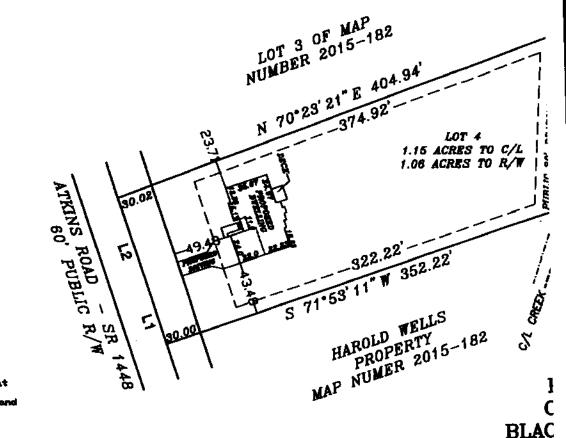
HOT AN ACTUAL FIELD SURVEY, INFORMATION THIS

WILLIAMS - PEARCE and ASSOC., PROFESSIONAL LAND SURVEYORS, P.A.

1000 N. ARENDELL AVE.

P.O. BOX 892, ZEBULON, N.C. 27597

PHONE: 919-269-9605 LIC. # C-0243





4	NAME: Rober	+ M	Yost		APPLICATION#:_	<u> 17500</u>	42651
•		*This appli	cation to be filled out	when applying for	a septic system in spe	ection.*	
	County Health [\martmar	ot Application for I	morovement P	Permit and/or Auth	norization to Co	<u>nstruct</u>
	THE THE STATE OF THE STATE OF THE	NETTER A DO	LIANTIAN ICENT CICIES	O CHANGED OR I	HE SHE IS ALL FRED.		
	DEDMIT OF A LITHORIZ	ATION TO CI	ONSTRUCT SHALL BE	COMPLINVALID. I	ne permit is valio for eiui	GLOO HIGHBISOL MITHOU	ut expiration
	depending upon documents	ation submitte	d. (Complete site plan = 6	50 months; Complete	CONFIRMATION #		
	910-893-7525		Cantin Custom Codo	900	CONTINUENT		
	Environmental H	ealth New	<u>Septic System</u> Code t <u>be made visible</u> . F	ooo Dace "nink nrone	rty flags" on each o	orner iron of lot.	All property
	lings must be	clearly flam	ned annroximately ev	erv 50 feet betwe	en corners.		
	Place "orange	house con	ner flags" at each cor	ner of the propos	ed structure. Also fla	ag driveways, gara	iges, decks,
	out huildings	swimming i	pools, etc. Place flag	s per site plan de	veloped atrior Centra	u Permitting.	
	Place orange	Environme	ntal Health card in loc	ation that is easil	v viewed from road to	o assist in locating	property.
	If property is t	thickly wood	ded Environmental H	lealth requires tha	at you clean out the <u>J</u>	<u>undergrowth</u> to a	llow the soil
	evaluation to	he nerforme	ed Inspectors should	l be able to walk t	reely around site. Do	not grade prope	erty.
	All lots to be	addressed	within 10 business	days after cont	irmation, \$25.00 ret	urn trip tee may t	ready
	<u>for failure to</u>	uncover of	utlet lid, mark house site call the voice pe	corners and pro	t 010-803-7525 antic	n 1 to schedule ar	nd use code
	Atter preparin	g proposed	cation permit if multip	ole permits exist)	for Environmental H	ealth inspection.	Please note
	confirmation	ecung noun umber nive	en at end of recording	for proof of requ	est.	,	
	Use Click2Gr	v or IVR to	verify results. Once	approved, procee	d to Central Permittir	ng for permits.	
1	🗱 Environmental F	lealth Exist	ting Ta <u>nk Inspection</u>	<u>ıs</u> Code 800			
	Follow above	instructions	s for placing flags and	l card on property	'.		
	Prepare for it	senection h	v removina sail over	outlet end of ta	nk as diagram indic	ates, and lift lid st	raight up (if
	possible) and	then put li	d back in place. (Un	less inspection is	for a septic tank in a	mobile nome park	.)
	DO NOT LEAV	E LIDS OFF	OF SEPTIC TANK and call the voice per	mitting outtons at	010-803-7525 antio	n 1.8 select notific	ation permit
	After uncover	ing outlet 6	use code 800 for E	milling system at Invironmental He	alth_inspection. Plea	se note confirmat	tion number
	diven at end	of recording	for proof of reguest.		<u> </u>		
	Use Click2Go	nv or IVR to	hear results. Once a	pproved, proceed	to Central Permitting	for remaining per	mits.
	CEDTIC:						
	If applying for authoriza	ation to const	ruct please indicate desir	ed system type(s): o	can be ranked in order of	preference, must cho	ose one.
	{}} Accepted	{}} Inr	novative {}	Conventional	{}} Any		
	{} Alternative	{}} Otl			_		
	The applicant shall noti question. If the answer	fy the local h	nealth department upon blicant MUST ATTAC	submittal of this ap H SUPPORTING	oplication if any of the DOCUMENTATION	following apply to th	ne property in
	{}YES {}NO	Does/the	site contain any Jur¦sdi	ctional Wetlands?			
	(INES (INO	Do lour	olan to have an irrigation	n system now or in	the future?	\	

.,, -				
{}} Accepted	{} Innovative {} Conventional Any			
{}} Alternative	{_}} Other			
The applicant shall notify question. If 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 Jun solictional Wetlands?			
()YES {} NO	Do you plan to have an <u>irrigation system</u> 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?			
YESNO /	Does the site contain any existing water, cable, phone or underground electric tines?			
	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.			
I Have Read This Applicat	tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And			
State Officials Are Grante	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.			
I Understand That I Am S	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making			
The Site Accessible So That A Complete Site Evaluation Can Be Performed. No but 10/30/2017				
PROPERTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE			