Initial Application Date:

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

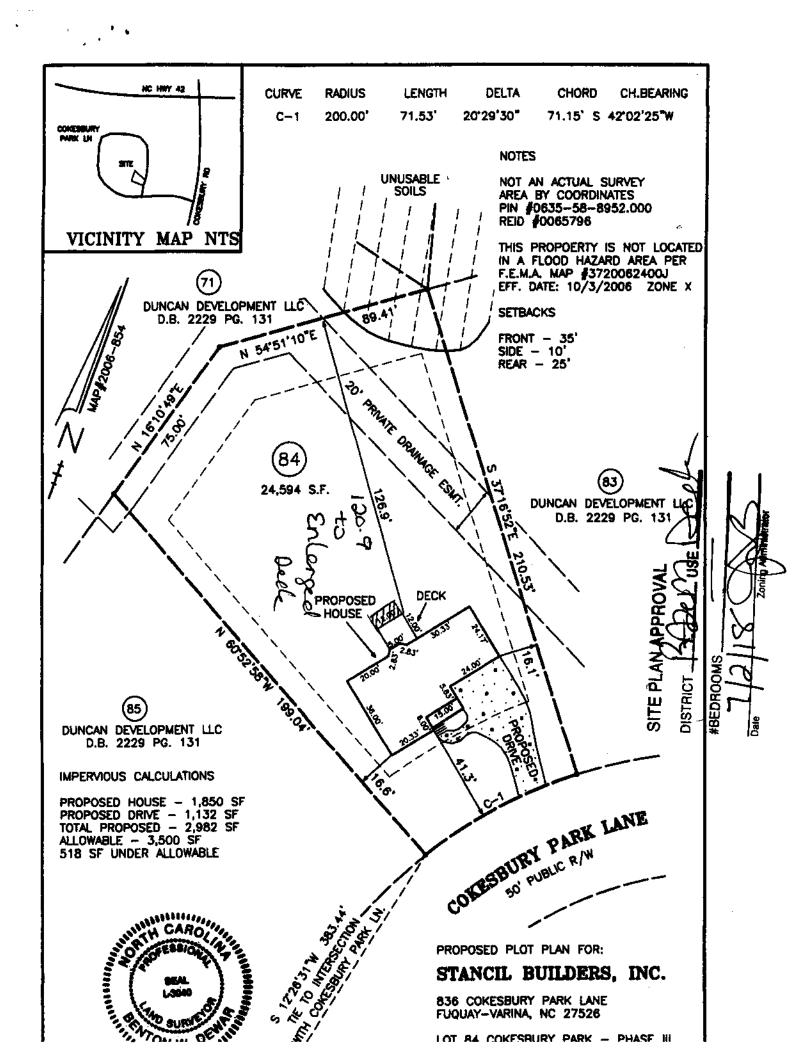
ANDOWNER: SAMUEL + SHEILA AGUILAR Mailing Address: 836 COKESBURY PARK LN
City: FUQUAY VARINA State: NC Zip: 27526 Contact No: Email:
APPLICANT*: SAME Mailing Address:
City: State: Zip: Contact No: Email: Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Phone #
PROPERTY LOCATION: Subdivision: Cokesbery Park Lot #:84 Lot Size: .55
State Road # 836 State Road Name: (okosbery Parle Map Book & Page 2013, 17)
Parcel: 05063502446 PIN: 0635-58-895200
Zoning: 1 Pob Flood Zone: K Watershed Peed Book & Page: 3413/387 Power Company*:
New structures with Progress Energy as service provider need to supply premise numberfrom Progress Energy.
PROPOSED USE: Monolithic
SFD: (Sizex) # Bedrooms: # Baths:Basement(w/wo bath); Garage: Deck: Crawl Space: Slab:
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 12 x 18) Use: Enloyery Deck to Closets in addition? (_) yes (A) 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:
Front Minimum SS Actual
Rear 2S 120.9
Closest Side
Sidestreet/corner lot
Nearest Building

Residential Land Use Application

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
······································	•
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulation	
I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit sub	ject to revocation ir faise information is provided.
Signature of Owner's Agent	2 18
Signature of Owner's Agent	' Dafe

^{***}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**



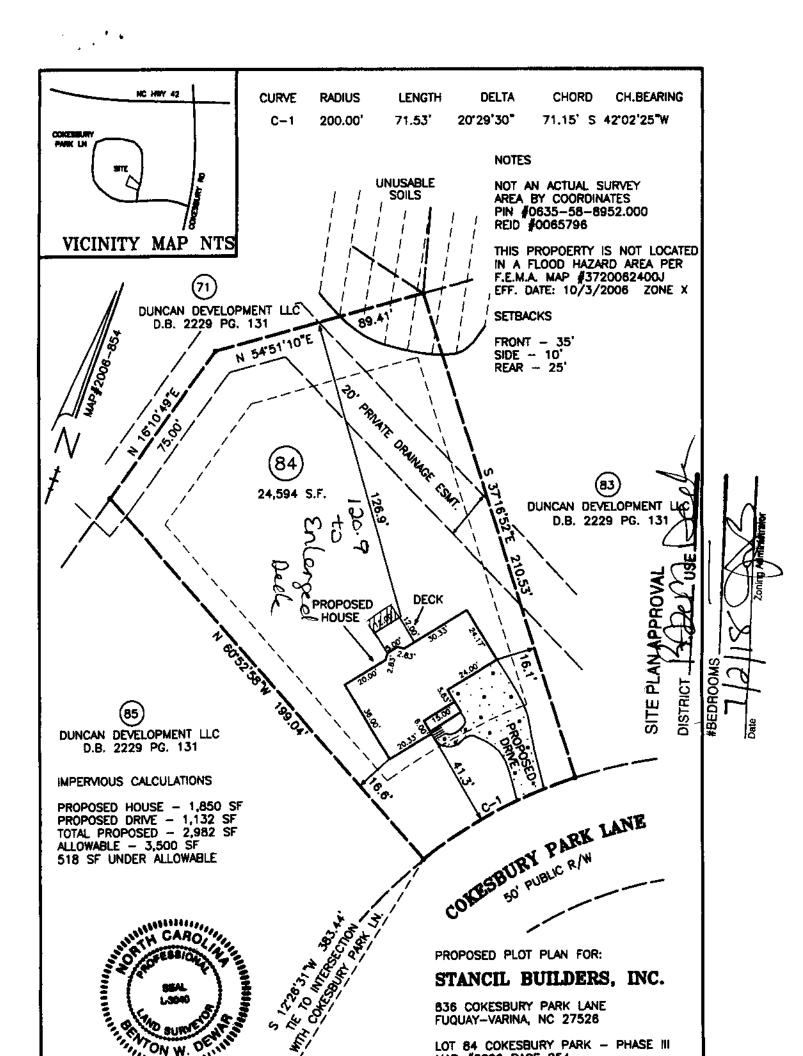
NAME:	APPLICATION #:
County Health De IF THE INFORMATION IN PERMIT OR AUTHORIZA	This application to be filled out when applying for a septic system inspection.* partment Application for Improvement Permit and/or Authorization to Construct THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration on submitted. (Complete site plan = 60 months; Complete plat = without expiration) potion 1 CONFIRMATION #
Environmental He All property in lines must be complete "orange from the buildings, some place orange E. If property is the evaluation to be a for failure to u. After preparing 800 (after select confirmation number of the select confirmation of the select confir	atth New Septic System Code 800 ons must be made visible. Place "pink property flags" on each corner iron of lot. All property early flagged approximately every 50 feet between corners. House corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, wimming pools, etc. Place flags per site plan developed at/for Central Permitting. Invironmental Health card in location that is easily viewed from road to assist in locating property. Inckly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil as performed. Inspectors should be able to walk freely around site. Do not grade property. Inderessed within 10 business days after confirmation. \$25.00 return trip fee may be incurred incover outlet lid, mark house corners and property lines, etc. once lot confirmed ready. Proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code atting notification permit if multiple permits exist) for Environmental Health inspection. Please note imber given at end of recording for proof of request. For IVR to verify results. Once approved, proceed to Central Permitting for permits. Inthe Existing Tank Inspections. Code 800 Instructions for placing flags and card on property. Proposed site call the voice permitting system at 910-893-7525 option 1 & select notification permit in the park in place. (Unless inspection is for a septic tank in a mobile home park) LIDS OFF OF SEPTIC TANK For outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
if multiple perr given at end of • Use Click2Gov SEPTIC	nits, then use code 800 for Environmental Health inspection. Please note confirmation number recording for proof of request. or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
{} Accepted	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. {} Innovative
The applicant shall notify question. If the answer is {}YES {}NO	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: Does the site contain any Jurisdictional Wetlands? Do you plan to have an irrigation system now or in the future? Does or will the building contain any drains? Please explain. Are there any existing wells, springs, waterlines or Wastewater Systems on this property? Is any wastewater going to be generated on the site other than domestic sewage? Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property? Does the site contain any existing water, cable phone or underground electric lines?
I Have Read This Applica	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And

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 Accessible So That A Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

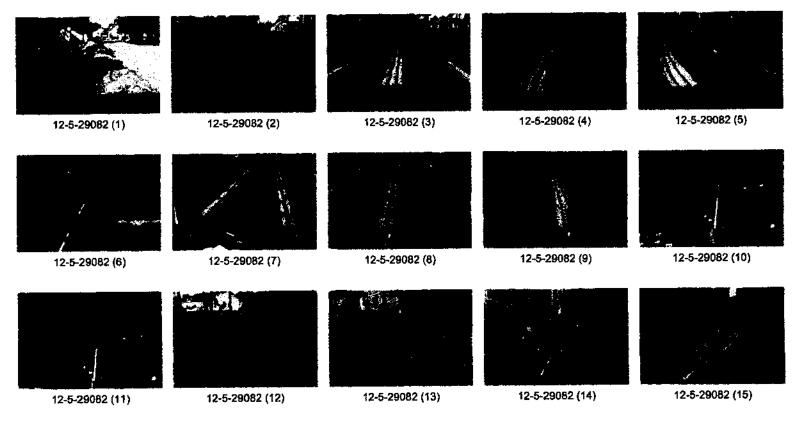
7 2 18 DATE



14			20002
HTE#	ĸ	-3	2/082
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Harnett County Department of Public Health

HTE# 12-5 - 21		^
PERMIT # 27012	2 Operation Permit 224	91
	New Installation 🗗 Septic Tank 🖾 Nitrification Line 🗀 Repair [☐ Expansion
	PROPERTY LOCATION: 50 1403 Cohombury PD	
Name: (owner) 3	111-01 130-0303	<u> </u>
System Installer:	Strovel Buldes Registration #	
Basement with plumbing Type of Water Supply:		
System Type: 7521	PEDUCTURE Secretary To rett 3 Types V and VI Systems expire in 5 years.	
(In accordance with Tab	Owner must contact Health Department 6 months prior to expiration for permit renewal.	
This system has been installed	d in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Author	ization.
1. sch goval	Cokesbury Pankla	
PERMIT CONDITIONS: I. Performance: II. Monitoring: III. Maintenance: IV. Operation:	System shall perform in accordance with Rule .1961. As required by Rule .1961. Other: Subsurface system operator required? Yes No to the system operator required?	_
•		_
Y. Other:	D. Roy Pump Alarm H20Line	— PWR Line
Following are the spec Type of system: Subsurface Drainage Field French Drain Required	cifications for the sewage disposal system on the above captioned property. Conventional Other Manufacture 25% Disputation Septic Tank: 1000 gallons Pump Tank: 1000 ho. of exact length width of depth of ditches 3 feet ditches 2431	<u>のい</u> gallons
richen Dram Required	Date 2-14-13	





12-5-29082 (16)

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Uper: JBROCK Type: CP Drawer: 1
Date: 7/02/18 52 Receipt no: 368

Year Number Amount 2018 50044401 51749 TECH 2 LILLINGTON, NC 27546 R4 BP - ENV HEALTH FEES \$180.00

EXT TANK

SHEILA AGUILAR

\$199.90 \$190.00 \$180.00 3105

Tender detail CK CHECK PAYMEN Total tendered Total payment Trans date: 7/02/18

7ime: 11:19:36

** THANK YOU FOR YOUR PAYMENT **