Initial Application	Date:	10-	12.	15	

Application # _	155003	726	l
	CU#		

AND USE APPLICATION

Central Permitting

108 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION ___ Mailing Address: 24 Meadwwood Court LANDOWNER: Mauro and Virginia Contreras City: Angier APPLICANT*: Mailing Address: _ Contact No: ___ Email: City: *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: Braxton Subdivision State Road Name: Meadowwood Court State Road # Parcel: 040683 0111 11 PIN: 0683-02-1095.000 Flood Zone: N/A Watershed: N/A Deed Book & Page 357 / 956 Power Company*: Duke Energy ith 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: (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: _ Home Occupation: # Rooms:_______ Use:______ Hours of Operation:______ #Employees: Addition/Accessory/Other: (Size 28.5 x 40.5) Use: Detached Garage 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: One existing Manufactured Homes: Other (specify): Comments: There are four existing drain lines on the existing septic system. Required Residential Property Line Setbacks: Actual 154.0 Minimum 35 They will shortened to maintain 11 feet from the proposed detached garage. Front 25 101.8 A new line shall be installed to maintain the proper length of drain lines Rear 10 11 Proposed garage has been staked out. All the property lines have been Closest Side N/A marked. Sidestreet/corner to 43.1 **Nearest Building**

on same lot

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

- Comme					
NAMI	E: Mauro Contreras	APPLICATION #: 37247			
	This application	on to be filled out when applying for a septic system inspection.			
Co		pplication for Improvement Permit and/or Authorization to Construct			
IF THE	INFORMATION IN THIS APPLICA	TION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT			
PERMI	T OR AUTHORIZATION TO CONST	TRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration			
aepena	910-893-7525 option 1	confirmation # 236			
	nvironmental Health New Sept				
•		<u>made visible</u> . Place "pink property flags" on each corner iron of lot. All propert approximately every 50 feet between corners.			
•		ags" at each corner of the proposed structure. Also flag driveways, garages, decks , etc. Place flags per site plan developed at/for Central Permitting.			
•		Health card in location that is easily viewed from road to assist in locating property.			
•		Environmental Health requires that you clean out the <u>undergrowth</u> to allow the sonspectors should be able to walk freely around site. Do not grade property .			
•		hin 10 business days after confirmation. \$25.00 return trip fee may be incurre			
		lid, mark house corners and property lines, etc. once lot confirmed ready.			
•	800 (after selecting notification	call the voice permitting system at 910-893-7525 option 1 to schedule and use cod n permit if multiple permits exist) for Environmental Health inspection. Please not			
		end of recording for proof of request.			
~ ·		y results. Once approved, proceed to Central Permitting for permits.			
X E	Follow above instructions for				
 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 					
		ck in place. (Unless inspection is for a septic tank in a mobile home park)			
•		all the voice permitting system at 910-893-7525 option 1 & select notification perm			
	if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number				
	given at end of recording for p				
e croppen		results. Once approved, proceed to Central Permitting for remaining permits.			
SERT If app		ease indicate desired system type(s): can be ranked in order of preference, must choose one.			
{}}	Accepted {_}} Innovati	, , , , , , , , , , , , , , , , , , ,			
{}}	Alternative {} Other	// <i>/</i>			
The ap	plicant shall notify the local health	department upon submittal of this application if any of the following apply to the property is MUSTATTACH SUPPORTING DOCUMENTATION:			
{}}Y	ES {X} NO Does the site of	ontain any Jurisdictional Wetlands?			
{}}Y	ES {X} NO Do you plan to	have an irrigation system now or in the future?			
{}}Y	ES {} NO Does of will th	e building contain any drains? Please explain			
{ X _}Y	ES {} NO Are there any	existing wells, springs, waterlines or Wastewater Systems on this property?			
{_}}Y	ES {X} NO Is any wastewa	ster going to be generated on the site other than domestic sewage?			

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.

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 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.

{_}}YES

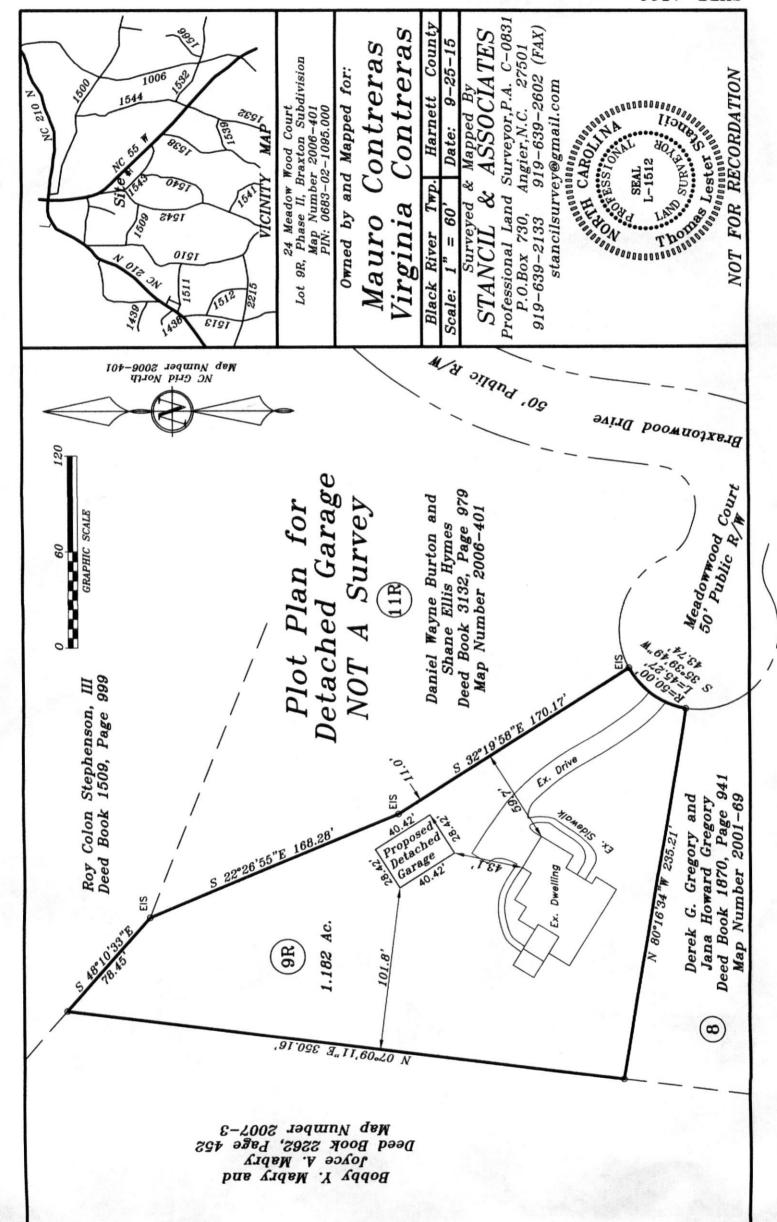
{_}}YES

RÓPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Is the site subject to approval by any other Public Agency?

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

DATE



THE THE PARTY OF Crope WILL

TOWN OF ANGIER LAND USE PERMIT

55 NORTH BROAD ST WEST ANGIER, NC 27501-0278

Phone: 919-639-2071 FAX: 919-639-6130

DATE ISSUED: 10/12/2015

PERMIT #: 2015-000271

DISTRICT

TAX MAP PARCEL#

LOCATION

24 MEADOWWOOD COURT

LOT

ZONING DISTRICT

\$ 0

OWNER:

MAURO CONTREROS

TOTAL VALUATION

CONTRACTOR:

SUBCONTRACTOR ID/NAME

SUBCONTRACTOR TYPE

TYPE CONSTRUCTION: LAND USE

OCCUPANCY GROUP: SINGLE FAMILY DWELLING

FEE CODE

FEE

LAND USE RESIDENTIAL

35.00

TOTAL PAID:

35.00

PAID IN FULL

TOTAL AMOUNT:

35.00

REMARKS:

LAND USE PERMIT FOR NEW DETACHED GARAGE

(SIGNATURE OF CONTRACTOR/OWNER)

(ICCLIED DV)

10/12/15

(DATE)

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TOWN OF ANGIER RESIDENTIAL PERMIT

55 NORTH BROAD ST WEST ANGIER, NC 27501-0278

Phone: 919-639-2071 FAX: 919-639-6130

DATE ISSUED: 10/12/2015

PERMIT #: 2015-000273

DISTRICT

TAX MAP PARCEL#

LOCATION

24 MEADOWWOOD COURT

LOT

ZONING DISTRICT

OWNER:

MAURO CONTREROS

TOTAL VALUATION

\$ 35,000

CONTRACTOR:

SUBCONTRACTOR ID/NAME

SUBCONTRACTOR TYPE

TYPE CONSTRUCTION: RESIDENTIAL UPFIT

OCCUPANCY GROUP: SINGLE FAMILY DWELLING

FEE CODE

FEE

ACCESSORY STRUCTURES/ACC. / RENOV. 801-1200 S

150.00

ELECTRICAL/ELECTRICAL - MINIMUM

50.00

TOTAL PAID:

200.00

PAID IN FULL

TOTAL AMOUNT:

200.00

REMARKS:

CONSTRUCTION PERMIT FOR NEW DETACHED GARAGE

(SIGNATURE OF CONTRACTOR/OWNER)

(ISSUED BV)

10/12/15

(DATE)