nitial Application Date:_	2-9-1	0
	v -	

Application #	165003	79	19	0

CU# _

COUNTY OF HARNETT 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

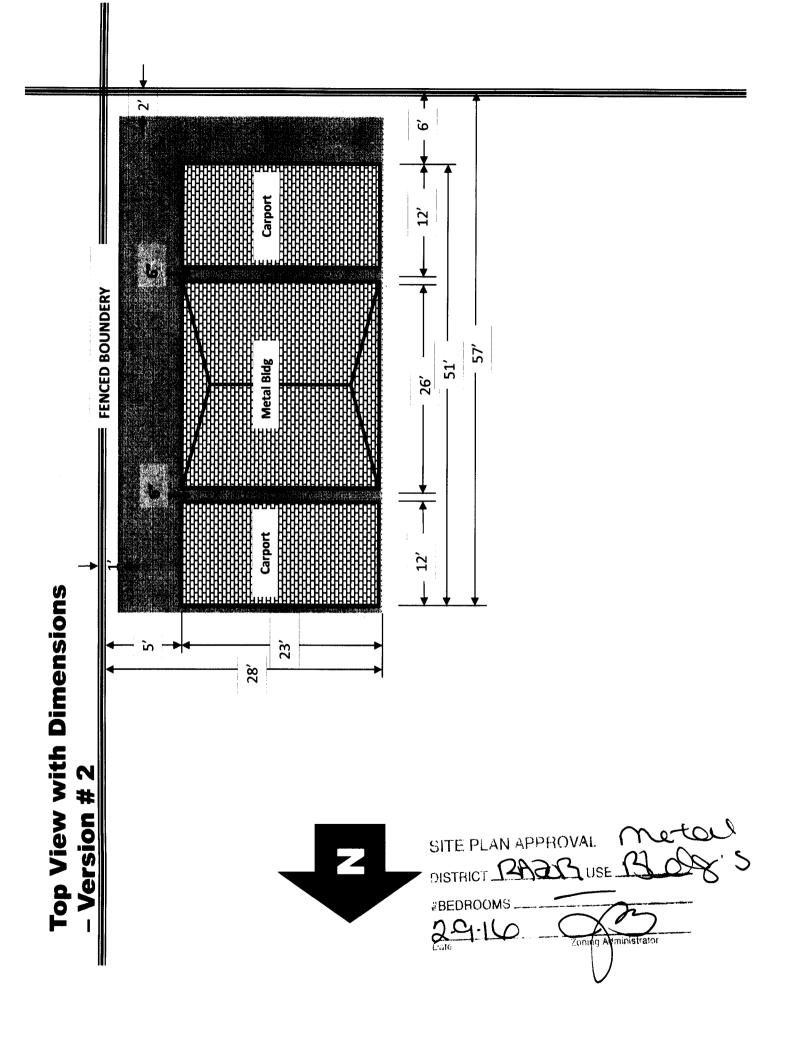
Central Permitting

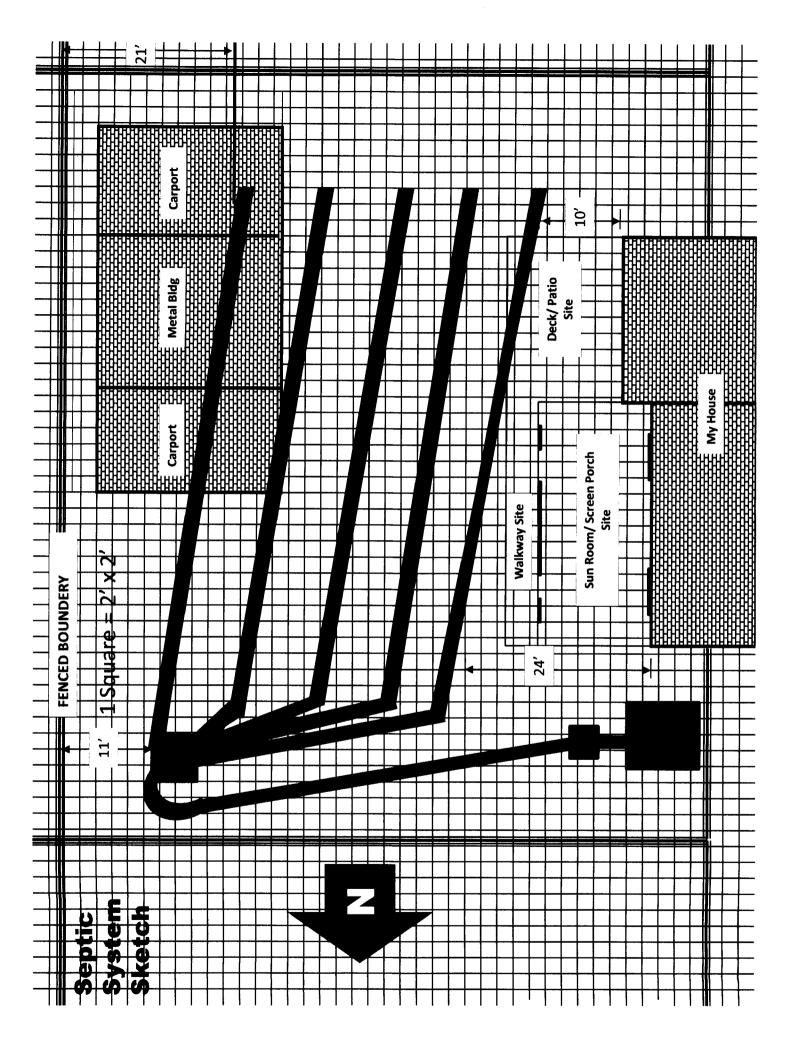
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE RE	QUIRED WHEN SUBMITTING A LAND USE	APPLICATION
LANDOWNER: KOBINSON, ALVIN	Mailing Address: 600	14 Crystal S	pring Dr.
city: Sanford state: NC			
APPLICANT*: Sayve	Mailing Address:		
City:State:	Zip: Contact No:	Email:	
Please fill out applicant information if different than landowner	0	Q1Q	i va h
CONTACT NAME APPLYING IN OFFICE:	n Robinson	Phone #919-815	-6004
PROPERTY LOCATION: Subdivision:	ew Estates	Lot #: 178 Lot :	
State Road # State Road Name: 6	04 (nystal Spring a	Map Book & Page	104,1224
Parcel: 03958712 0020 41	PIN: <u>9587</u> -	82-4788.000	
Zoning: RA-20L Flood Zone: Watershed:	Deed Book & Page: 2209 / 3	58Power Company*:	
New structures with Progress Energy as service provid			
PROPOSED USE:			Manualidi ia
SFD: (Sizex) # Bedrooms: # Bath (Is the bonus room finished	s: Basement(w/wo bath): Garage: ed? () yes () no w/ a closet? () ye		
Mod: (Sizex) # Bedrooms # Bath (Is the second floor finish	s Basement (w/wo bath) Garage:_ ed? () yes () no		Off Frame
☐ Manufactured Home:SWDWTW (Si	zex) # Bedrooms: Gar	rage:(site built?) Deck:(sit	te built?)
□ Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:		
☐ Home Occupation: # Rooms: Use	: Hours of Operati	ion:#E	mployees:
Addition/Accessor/Other: (Size(X)(x)(x)(2)) Us Output Output	Corports not	Closets in addition Closets in addition The control of the contr	sones o
Sewage Supply: New Septic Tank (Complete Ch	\ /		
Does owner of this tract of land, own land that contains	a manufactured home within five hundred	eet (500') of tract listed above? () y	res 🗾 no
Does the property contain any easements whether unde	erground or overhead () yes (\(\sum_{} \) no		
Structures (existing or proposed): Single family dwelling	s: Manufactured Homes	:: Other (specify):_	
Required Residential Property Line Setbacks:	Comments:	of 3 bl	olg.
Front Minimum Actual	loft bet	ween ear	<u> </u>
Rear	not atter	schod	
Closest Side		•	
Sidestreet/corner lot			
Nearest Building			
on same lot Residential Land Use Application	Page 1 of 2	A 01/2	03/11
	APPLICATION CONTINUES ON BA	ACK	

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
	_
	_
	_
	_
	_
	_
If permits are granted I agree to conform to all commances end laws of the State of North Carolina regulating such work and the specifications of plans so I hereby state that foregoing statements are courage and correct to the best of my knowledge. Permit subject to revocation if false information is provided by the	submitted ded.

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





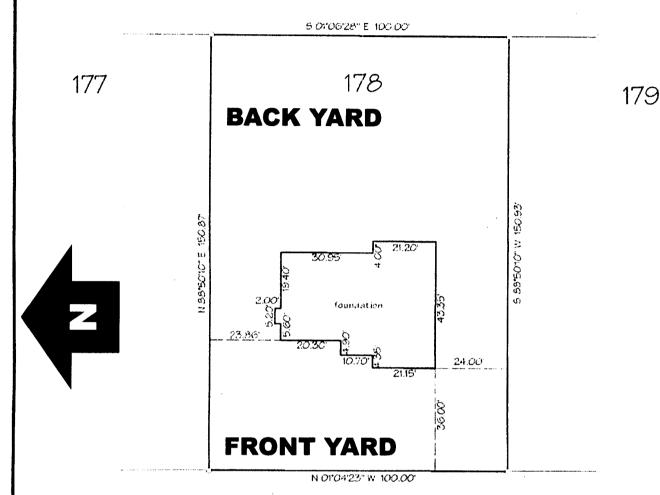
George L. Lott

Professional Land Surveyor

126 Romand Circle, Fayetteville, N.C. 28301 (910) 488-8659 494-2178 WWW.georgelott.com







Crystal Spring Drive 50' R/W

Regency Construction

Crestview Estates, Phase 4 map # 2004-1222 Harnett County North Carolina Scale 1" = 30' jan. 5, 2006

604 Crystal Spring DR Sanford, NC 37332

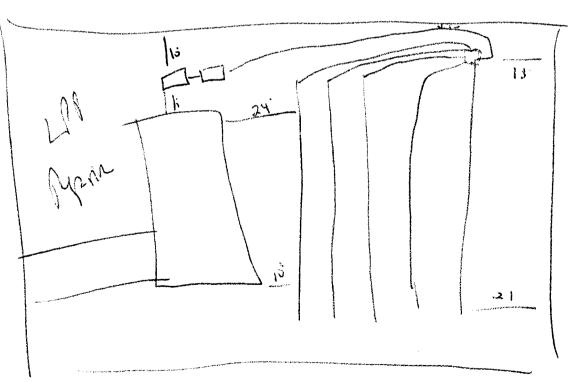
18222

HTE # 05-50012279 CARNETT COURTENVIRONME

ARNETT COUNTY HEALTH DEP TMENT ENVIRONMENTAL HEALTH SECTION

OPERATIONS PERMIT

Name: (owner) Regency Homes	New Installation Septic Tank Repair		
Property Location: SR# 115 Subdivision CRestor Lot # 178 Tax ID	_ Nitrification Line		
- 1 O	Registration #		
	Like I OH Took OK I-BOUGHW		
Water Supply: Well Public Community Distance From Well:ft.	Chech		
Following are the specifications for the sewage dispo			
Type of system: ☐ Conventional ☑ Other	of to Ultra Imiles Trackp		
Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons			
Subsurface No. of exact length of each ditch	width of depth of ditches 12 in.		
French Drain Required: Linear feet	Date: 2-22-06		
PERMIT NO	Inspected by: Joe WA 18		



	Λ , Ω	
NAME	: ALVIN TOBINSON	APPLICATION #:
	This application to be fill	ed out when applying for a septic system inspection.
Cor	unty Health Department Application	for Improvement Permit and/or Authorization to Construct
IF THE	INFORMATION IN THIS APPLICATION IS FAI	SIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
PERMIT	FOR AUTHORIZATION TO CONSTRUCT SHA	LL BECOME INVALID. The permit is valid for either 60 months or without expiration
dependir	ig upon documentation submitted. (Complete site	plan = 60 months; Complete plat = without expiration)
	910-893-7525 option 1	CONFIRMATION #
<u>En</u>	vironmental Health New Septic System	Code 800
•	All property irons must be made visi	ble. Place "pink property flags" on each corner iron of lot. All property
	lines must be clearly flagged approximat	ely every 50 feet between corners.
•	Place "orange house corner flags" at eac out buildings, swimming pools, etc. Place	ch corner of the proposed structure. Also flag driveways, garages, decks, e 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, Environme	ntal Health requires that you clean out the <u>undergrowth</u> to allow the soil
	evaluation to be performed. Inspectors s	should be able to walk freely around site. Do not grade property.
•	All lots to be addressed within 10 bus	iness days after confirmation. \$25.00 return trip fee may be incurred
	for failure to uncover outlet lid, mark l	nouse corners and property lines, etc. once lot confirmed ready.
•	After preparing proposed site call the voi	ce 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 reco	ording for proof of request.
•	Use Click2Gov or IVR to verify results. C	Once approved, proceed to Central Permitting for permits.
<u>En</u>	vironmental Health Existing Tank Inspe	ections Code 800
•	Follow above instructions for placing flag	s and card on property.
•		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 TAN	IK
•	After uncovering outlet end call the voic	e 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 requ	<u>uest</u> .
•	Use Click2Gov or IVR to hear results. Or	ice approved, proceed to Central Permitting for remaining permits.
SEPTIC		
If apply	ing for authorization to construct please indicate	desired system type(s): can be ranked in order of preference, must choose one.

{__} Conventional

question. If the answer is "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.

Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property?

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in

Is any wastewater going to be generated on the site other than domestic sewage?

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 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

EGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Are there any existing wells, springs, waterlines or Wastewater Systems on this property?

{__}} Any

9 Feb 2016 DATE

10/10

{__}} Accepted

{__}} Alternative

{__} NO

{__} NO

{_}} NO

{___} NO

{__}} NO

{__} NO

{__} NO

{__}} NO

{__}}YES

{__}}YES

{__}}YES

{___}}YES

{__}}YES

{__}YES

{_}}YES

{__}}YES

{__}} Innovative

The Site Accessible so Phat A Complete Site Evaluation Can Be Performed.

{___} Other __

P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (9 Bldg Insp scheduled before 2pm available next	910) 893-2793 business day	
Application Number 16-50037990 Property Address 604 CRYSTAL SPRIN PARCEL NUMBER 03-9587-12002 Application description CP GARAGE/CARPORT Subdivision Name CRESTVIEW ESTATES Property Zoning RES/AGRI DIST - R	Date IG DR 1041- 1 RESIDENTIAL	2 3/14/16 DETACHED
Required Inspections		
Phone Insp Seq Insp# Code Description	Initials	Date
Permit type RESIDENTIAL BUILDING PERMIT		
999 111 B111 R*BLDG SLAB INSP/TEMP SVC POL 999 131 R131 ONE TRADE FINAL		_/_/_
Permit type LAND USE PERMIT		
999 818 Z818 PZ*ZONING INSPECTION 999 820 Z820 PZ*ZONING/FINAL INSPECTION		-/-/-

HARNETT COUNTY CENTRAL PERMITTING

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 16-50037990 Date 3/14/16
Property Address 604 CRYSTAL SPRING DR
PARCEL NUMBER 03-9587-12- -0020- -41-Application type description CP GARAGE/CARPORT RESIDENTIAL DETACHED Subdivision Name CRESTVIEW ESTATES
Property Zoning RES/AGRI DIST - RA-20R Contractor Owner -----ROBINSON ALVIN C OWNER 604 CRYSTAL SPRING DRIVE NC 27332 SANFORD Applicant ROBINSON ALVIN 604 CRYSTAL SPRING DR SANFORD NC 27332 (919) 815-6004 Structure Information 000 000 26X23 METAL GARAGE W/ 2-12X23 CARPORTS Flood Zone FLOOD ZONE X Other struct info PROPOSED USE METAL STRU SEPTIC - EXISTING? EXT WATER SUPPLY COUNTY Permit RESIDENTIAL BUILDING PERMIT Additional desc . . Phone Access Code . 1126374 Issue Date . . . 3/14/16 Valuation . . . 22126 Expiration Date . . 3/14/17 Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1130418
Tssue Date 3/14/16 Issue Date 3/14/16 Valuation Expiration Date . . . 9/10/16

Special Notes and Comments
T/S: 02/09/2016 09:04 AM JBROCK ---CRESTVIEW EST LOT 178 ADDRESS 604
CRYSTAL SPRING DR

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546