Initial Application	Date: 5-	6-1	6
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Application # _	650038654
	O1144

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 h Thompson Mailing Address: 285 BArley State: N. C. Zip: 2752 / Contact No: __ Phone # 910-263-0310

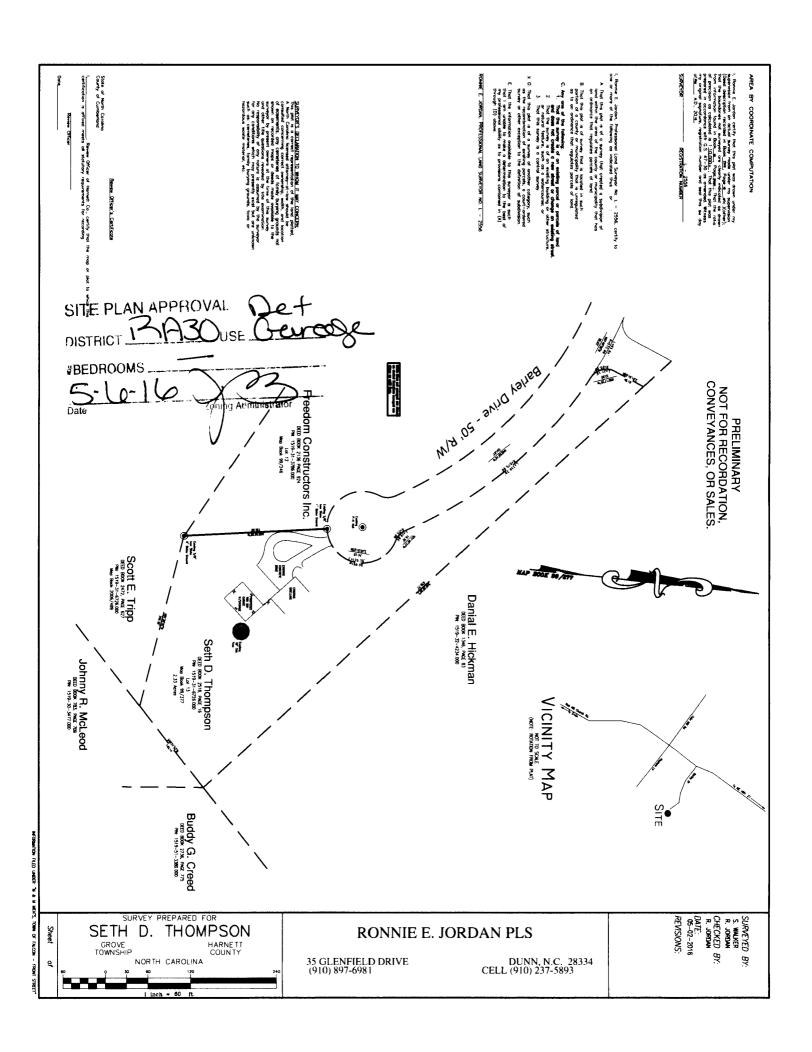
Lot #: 13 Lot Size: 2.31 Acres CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: FIATVES Deed Book & Page: 025/8/00/6 Power Company*: *New structures with Progress Energy as service provider need to supply premise number ______ __ from Progress Energy. PROPOSED USE: Monolithic x____) # Bedrooms:___ # Baths:__ Basement(w/wo bath):___ Garage:___ Deck:___ Crawl Space:__ Slab:_ SFD: (Size ____ (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:____ Addition/Accessory/Other: (Size $\frac{74}{2} \times \frac{34}{2}$) Use: \(\subseteq \text{Le-} Closets in addition? (__) yes (__) 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: 1 ex + Manufactured Homes: Other (specify): 1 Required Residential Property Line Setbacks: Comments: Front Rear **Closest Side** Sidestreet/corner lot

Nearest Building on same lot

SPECIFIC DIR	ECTIONS TO TH	E PROPERTY F	ROM LILLINGTON	ı: K)o	east on 42	I HMY,	turn let	Y
anto 1	Red Hill	Phurch	rd ao	ADD TO	. 3 miles	turn	Right in	v to
HArves	4 Drove	subo	7 1	ON	Barley Dr.	Addi	135 285	Briling
<u></u>	GARAGE		K vard.		/			
			/		•			
					2/86			
7	•		_					
If permits are g	granted I agree to	conform to all ord	linances and laws	of the State of	North Carolina regulatin knowledge. Permit sub	g such work an	d the specifications on if false information	of plans submitted is provided.
r nereby state (triat ioregoing/stat	XIII	S S	are best or my	in the second se	5-5-16	6	•.
	- Harris	Signature of Ov	vner or Owner's	\gent		Date	•	
	. 1	/						N

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 #:
	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 INFORMATIO	N IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
depending upon docume	AIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration entation submitted. (Complete site plan = 60 months; Complete plat = without expiration)
910-893-75	
	I Health New Septic System Code 800
lines must b	ty irons must be made visible. Place "pink property flags" on each corner iron of lot. All property be clearly flagged approximately every 50 feet between corners.
out building	ge house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, s, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
 Place orange 	ge Environmental Health card in location that is easily viewed from road to assist in locating property.
If property i	s thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil
• All lots to l	o be performed. Inspectors should be able to walk freely around site. Do not grade property. 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.
	ring proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code
800 (after s	electing notification permit if multiple permits exist) for Environmental Health inspection. Please note
/ confirmation	number given at end of recording for proof of request.
	Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
	<u>Health Existing Tank Inspections</u> Code 800 re instructions for placing flags and card on property.
Prepare for	re instructions for placing hags and card on property. I inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (<i>if</i>
possible) ar	nd then put lid back in place . (Unless inspection is for a septic tank in a mobile home park)
 DO NOT LEA 	AVE LIDS OFF OF SEPTIC TANK
	ering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
	permits, then use code 800 for Environmental Health inspection. Please note confirmation number
	d of recording for proof of request. Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
SEPTIC SEPTIC	sov or twit to hear results. Once approved, proceed to Central Permitting for remaining permits.
	zation to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{} Accepted	{} Innovative \ {} Conventional \ {} Any
{} Alternative	{}}Other
	tify the local health department upon submittal of this application if any of the following apply to the property in
question. If the answe	er is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
() VES () NO	Does the site contain and lurisdictional Westerney
{}YES {} NO {}YES {} NO	
{_}}YES {}NO	
{}}YES {}NO	
{}YES {NO	
{_}}YES {}} NO	
{_}}YES /_}NO	
{_}}YES {} NO	

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 of That A Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5-5-20/6