	6	
Initial Application Date: 5200	Application #	
COUNTY OF HARNETT RESIDENTIAL Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 8	LAND USE APPLICATION	ts
LANDOWNER: Higinio Santana Mailing Addre	177 Garfield Dr. 910-658-40	99
City: Willington State: NC ZID: 27544 Home #:	915-814-079 Contact #910-814-679	
APPLICANT: HOOLO Santana Mailing Addres	0 0	
	210-814-0799 contact #: 910-658-4099	う
CONTACT NAME APPLYING IN OFFICE: HIGINTO Santan	Q Phane #: 910-814-0799	
PROPERTY LOCATION: Subdivision: AUTCU ACTES	Lot #: 4 Lot Acreage: 1-85	
State Road #: 2031 State Road Name: WIFE RO	Map Book&Page 2002/ //8/	
Parced: 12 0556 0140 11 PIN: 05	56- 74-0012-000	
Zoning: Oone, Flood Zone: One Watershed: OlA Deed Book&P		
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:		
10 BUNNLEUEL TAKE RIGHT ON M		
INTERSECTION TURN LEGT ON WIP	E ROAD - About & milE	
TWEN Right Jimmy LANE LO		
PROPOSED USE: (Include Bonus room as a bedroom if it has a c	•	
O SFD (Size x ) # Bedrooms # Baths Basement (w/wo bath)		1200
☐ Mod (Size x ) # Bedrooms # Baths Basement (w/wo bath) ☐ Manufactured Home: X SW DW TW (Size 14 x PO) # Bedrooms		,
Duplex (Size x ) No. Buildings No. Bedrooms/Unit	Garage NO (site built? NO Deck NO (site built?	
U Home Occupation # RoomsUse		
Addition/Accessory/Other (Size x ) Use		
*Homes with Progress Energy as service provider need to supply premise number from	Closets in addition(_)yes (_)no	
Towns were riograss kindly as service produce mean to supply profitted month	riugiass Eliargy	
Water Supply: (X) County (_) Well (No. dwellings) MUST have of	perable water before final	
	sting Septic Tank () County Sewer	
Property owner of this tract of land own land that contains a manufactured home w/in fiv	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Homes DOD Other farm-	
Required Residential Property Line Setbacks: Comments:		
3		
Front Minimum 1 Actual 35	18-	
Rear	0,000	
Closest Side	10010	
Sidestreet/corner lot		
Nearest Building / / / / / / / / / / / / / / / / / / /		
Managha and all and a second all a second al		
If permits are granted I agree to conform to all ordinances and laws of the State of North		ied.
I hereby state that foregoing statements are accurate and correct to the best of my know	reage. Permit subject to revocation if false information is provided.	
Haiginio SANTANA	5-22-2008	
Signature of Owner or Owner's Agent	Date	
"This application evaluate from the initial		

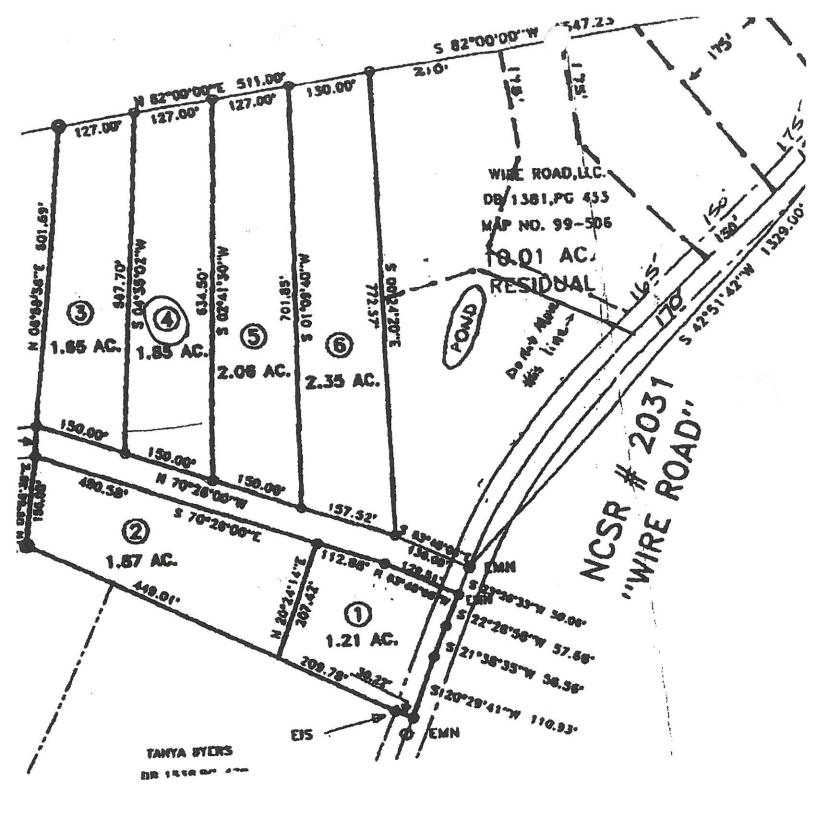
"This application expires 6 months from the initial date if no permits have been issued"

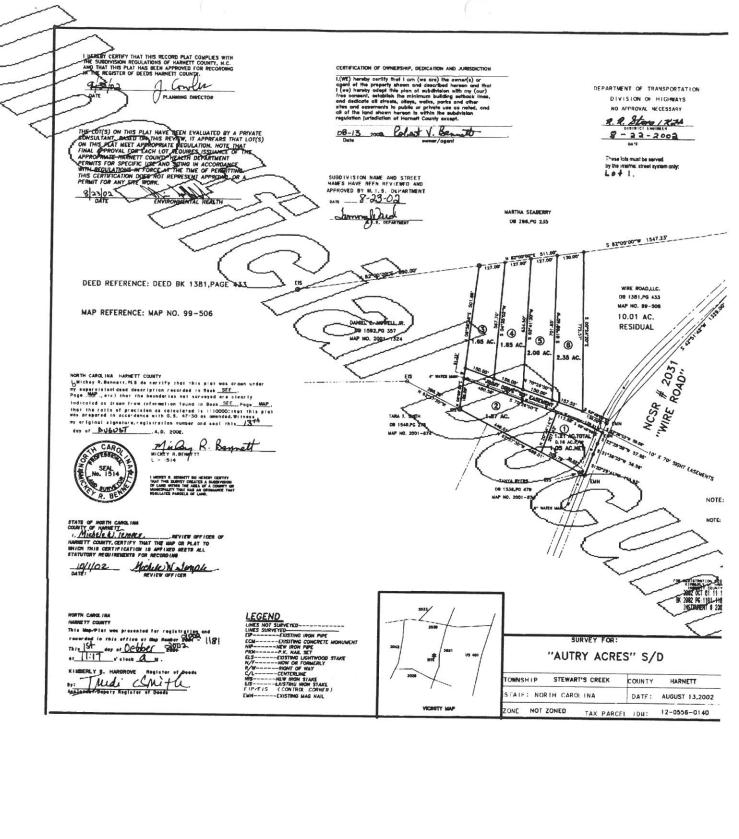
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION
Please use Blue or Black Ink ONLY

5/23/08
5

		71	
587.70'	550'		634.50°
		80 35' 'ss 3	-

CITE PLAN APPROV	AL	
DISTRICT 1700E	_USE_SU	UMH
#BEDROOMS	3	- Ing-plant
<u>5/aa/08</u>	900	
h	ZOWNG ADMINI	STRATOR
Higinia	SANT	ana





NAME: 0850000135

APPLICA NH: 0850020135

\*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 INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT

PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration

depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

-	vironmental Health New Septic Systems Test Place "pink property flags" on each corner iron		000	
En	Vironmental Health New Septic Systems Test	Code 800	メソナフリコい	VDF 1 H
	Place "pink property flags" on each corner ince	-Clark Att - 2	1010	of 1 th
	have broberty upga ou gach could not	ON OIL THE BOODERTY	lines must be clearly flag	aged approximately

- every 50 feet between corners.

  Place "orange bouse corner flees" et each corner flees" et each corner flees" et each corner flees "orange bouse bouse bouse bouse corner flees "orange bouse bouse
- Place "orange house corner flags" at each corner of the structure site. Use additional flags to outline driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place Environmental Health "orange" card in location that is easily viewed from road.
- If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil
  evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property.
- Call No Cuts to locate utility lines prior to scheduling inspection. 800-632-4949 (This is a free service)
- After preparing proposed site call the voice permitting system at 910-893-7525 and use code 800 (after selecting notification permit if multiple permits) for Environmental Health confirmation. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for permits.
- ☐ Environmental Health Existing Tank Inspections Code 800
  - Place Environmental Health "orange" card in location that is easily viewed from road. Follow above instructions for placing flags on property.
  - Prepare for inspection by removing soil over door as diagram indicates. Loosen trap door cover. (Unless
    inspection is for a septic tank in a mobile home park)
  - After preparing trapdoor call the voice permitting system at 910-893-7525 & select notification permit if multiple
    permits, then use code 800 for Environmental Health confirmation. Please note confirmation number given at
    end of recording for proof of request.
  - Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

<u>SEPTIC</u>
If applying for authorization to construct please indicate desired system type(s); can be ranked in order of preference, must choose one.
Accepted [_] Innovasive [_] Conventional [_] Any
\{_\} Alternative \( \_\) Other
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant must attach supporting documentation.
{}}YES NO Does the site contain any Jurisdictional Wetlands?
{}}YES {} NO Do you plan to have an irrigation system flow or in the future?
{} YES {} NO Does or will the building contain any drains Please explain.
()YEY () No Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}YVS {} NO Is any wastewater going to be generated on the site other than domestic sawage?
[_] 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?
[_]YES {_} NO Does the site contain any existing water, cable, phone or underground electric lines?
14-yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.
Have Read This Application And Cortify That The Information Provided the

I Habe 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)

5-22-08 DATE



## OWNER NAME: Higinio Santana

APPLICATION #: 0850020135

\*This application to be filled out only when applying for a new septic system.\*

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

D.P.	YPI OBMENT INFORMATION	
7	VELOPMENT INFORMATION  New single family residence	
<i>[</i>		
0	Expansion of existing system	
0	Repair to malfunctioning sewage	disposal system
a	Non-residential type of structure	
	ATER SUPPLY	
	-New well	
	Existing well	
-	Community well	•
, -	Public water	
	Spring	
		r existing waterlines on this property?
{_}}	yes 💢 no () unknown	
SEP		
ir ap		please indicate desired system type(s): can be ranked in order of preference, must choose one.
	Accepted {_} Innova	ttive
	Alternative {} Other	
	Conventional () Any	
The a	applicant shall notify the local heal tion. If the answer is "yes", applica	th department upon submittal of this application if any of the following apply to the property in until must attach supporting documentation.
( )	YES NO Does the site	contain any Jurisdictional Wetlands?
	<i>F</i> .	contain any existing Wastewater Systems?
		SOUR SOURCE TO LOCAL TO LOCAL TO CONTROL TO
	2/	vater going to be generated on the site other than domestic sewage?
(_)		ject to approval by any other Public Agency?
(}Y		easements or Right of Ways on this property?
'	7	contain any existing water, cable, phone or underground electric lines?
I Havo	II yes piease	call No Cuts at 800-632-4949 to locate the lines. This is a free service.
State	Officials Are Comment Date of Section	That The Information Provided Herein is True, Complete And Correct. Authorized County And
1 Undo	erstand That I Am Salab December 1	To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
The Si	in Accessible So That A Committee of	For The Proper Identification And Labeling Of All Property Lines And Corners And Making
	to Accessible So That A Complete Si	= Evaluation Can Be Performed.

FROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5. 22-2008