

Application # 10 500 24198

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Environmental Health Permit in Towns/Areas Zoned by Municipalities

Land Owner Information:
Name: Alice J. Roberts
Address: PO Box 398
Coats, NC 27521
Phone: (910) 897-8255

Applicant Information:
Name: Elizabeth Gonzalez Marquez
Address: C/O Charles Anthony Stewart
PO Box 1027, Coats, NC 27521
Phone: (910) 897-8271

Property Location: Tract No. 1, 0.76 Acres, Map Book 2010, Page 256, Harnett County Registry.
E911 Address: _____
PIN or Parcel Number: out of: 07-0690-0015
Subdivision: Westview S/D Lot Number: Tr 1 - Portion Lt 6
Lot Size: 0.76 Zoning: Coats Zone Power Co: Progress Energy
R/A

Specific Directions to Job from Lillington: From courthouse head southeast on NC 401 to intersection
Continue straight through intersection on Hwy 421 approx 3 miles; turn left onto Leslie
Campbell Ave travel approx 2.6 miles to McLamb Road; turn right onto McLamb Road and travel
approx. 0.5 miles to Fleming Road; turn left onto Fleming Road and travel approx. 1.1 miles
to Horse Pen Lane. Turn left onto Horse Pen Lane - lot is at end of drive on the left.
Proposed Use:

- Single Family Dwelling (Size: _____ x _____) # of Bedrooms: _____
Basement: _____ Basement w/ Plumbing: _____ Deck: _____ Slab or Crawl Space
- Multi Family Dwelling # of Units: _____ # of Bedrooms/Units: _____
- Manufactured Home (Size: 28 x 44) # of Bedrooms: 3
Garage: _____ Deck: _____
- Business Square Footage Retail Space: _____ Type: _____
- Industry Square Footage: _____ Type: _____
- Home Occupation # of Rooms: _____ Use: _____
- Addition to Existing Building Size: _____ Use: _____
- Other: _____

Water Supply: County Well Other
Sewage: New Septic Tank (Complete new tank checklist) Existing Septic Tank Sewer
There is a \$250.00 charge for new tanks, \$100 for existing tanks. This approval is subject to revocation if the intended use of the septic system changes or if false information is provided on this application. Your signature below certifies all information above is correct.

Applicant Signature: Charles A. Stewart Date: 4-14-10

Map 2010-256

map # 2006-1030

Now or Formerly
INEZ BARNES PARKER

- FIP..... Found Iron Pipe
- SIP..... Set Iron Pipe
- FCM..... Found Concrete Monu
- FPK..... Found P.K. Nail
- PKS..... Set P.K. Nail
- FRB..... Found Rebar
- SRB..... Set Rebar
- R/W..... Right of Way
- CL..... Centerline
- CP..... Computed Point
- FRRS..... Found Railroad Spike
- SRRS..... Set Railroad Spike
- AXF..... Found Axle
- FLK..... Found Lightwood Kno

Information on Residual
Tract Taken From Deed

PLEASANT
15, Page 793
8, Page 595
5, Page 27

Map Book 13
Page 27

ALICE J. ROBERTS
Deed Book 498, Page 430
1.54 Acres Residual
(By Subtraction)
NCPIN: 0680-44-6252.000
Parcel ID: 070680 0015
Not Surveyed
Information Taken
From Deed

I hereby certify that the
comply with the Subdivisio
Carolina, and that this pl
of the Register of Deeds

4-7-

Date

LINDA JO JOHNSON
Deed Book 769, Page 701

State of North Carolina
County of Harnett

I, Shula K. Beam
County, certify that the n
meets all statutory requi

4-7-10

Date

JENNIFER L. GILBERT
Deed Book 2177, Page 539
Map # 2004-860

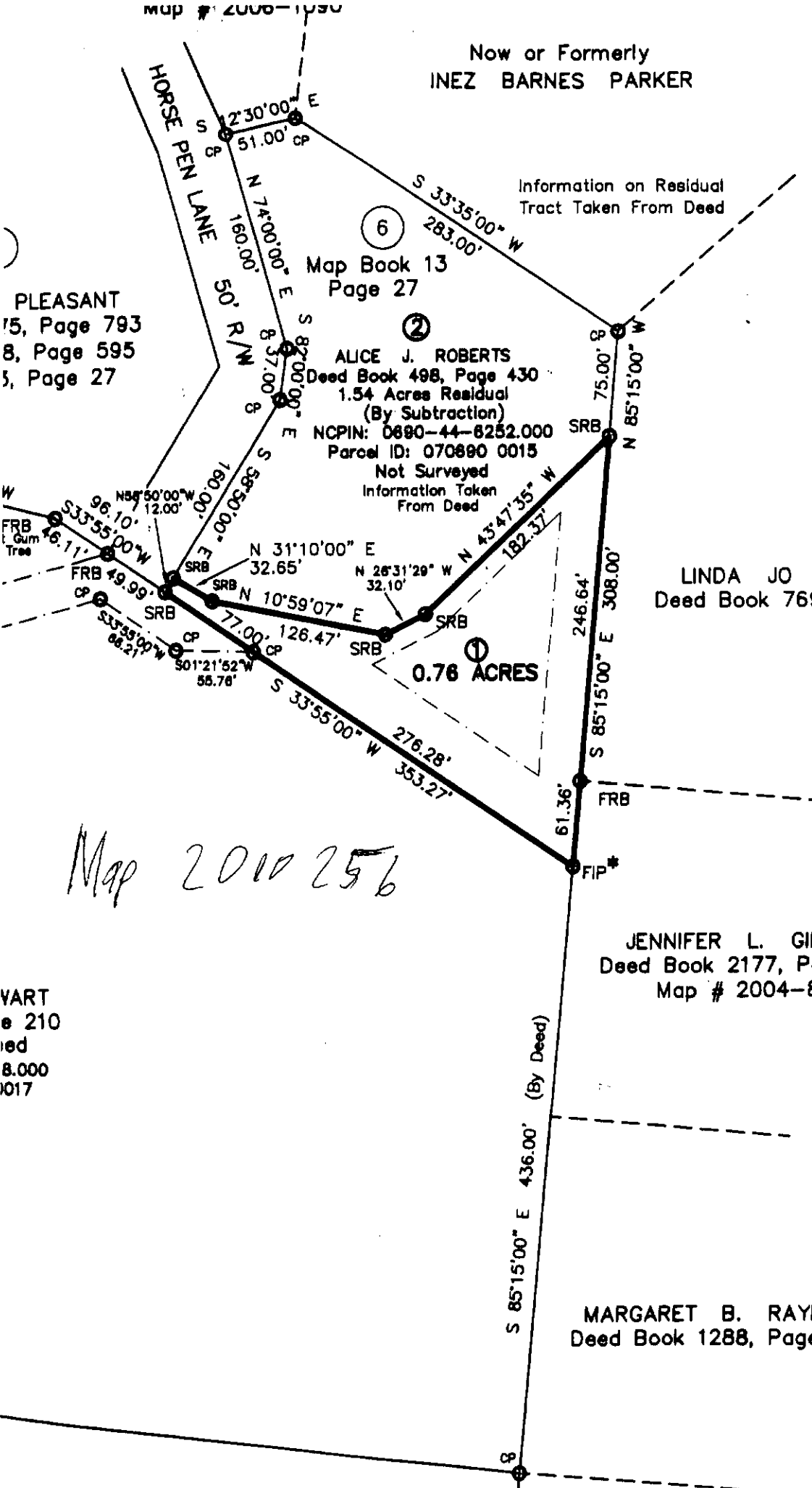
NORTH CAROLINA
HARNETT COUNTY
This Map/ Plat was preser
in this office at Map Num
This 7 day of Apr
KIMBERLY S. HARGROVE
Register of Deeds

By: Angela J. E
Asst. Deputy Reg

MARGARET B. RAYNOR
Deed Book 1288, Page 641

VART
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1017

Map 2010 256



NAME: Elizabeth Gonzalez Marquez

APPLICATION #: 1050024198

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)

910-893-7525 option 1

CONFIRMATION # 108036

Environmental Health New Septic System Code 800

- Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place 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, 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 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 recording for proof of request.**
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card 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 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 request.**
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

{ } Accepted { } Innovative { 1 } 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 { XX } NO Does the site contain any Jurisdictional Wetlands?
- { } YES { XX } NO Do you plan to have an irrigation system now or in the future?
- { XX } YES { } NO Does or will the building contain any drains? Please explain. It will have domestic kitchen and lavatory drains - no other drains to be located thereon.
- { } YES { XX } NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
- { } YES { XX } NO Is any wastewater going to be generated on the site other than domestic sewage?
- { } YES { XX } NO Is the site subject to approval by any other Public Agency?
- { } YES { XX } NO Are there any easements or Right of Ways on this property?
- { } YES { XX } NO 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 The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Charles A. Stewart

4-14-10

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE