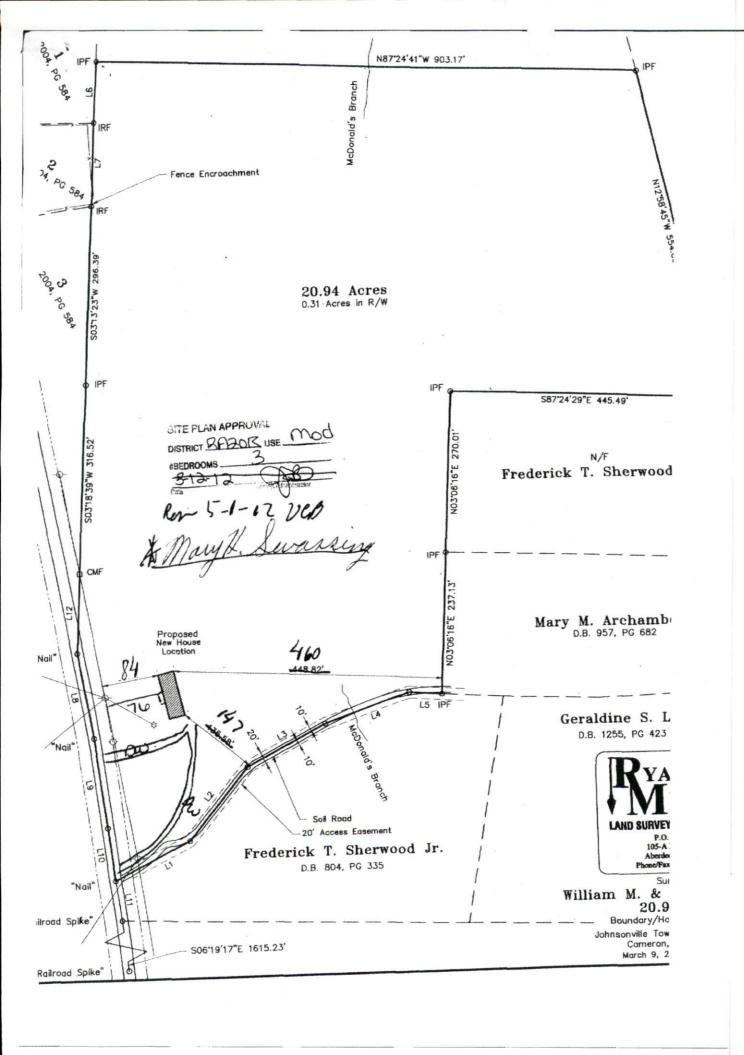
5-1-1'L SCANNED
Initial Application Date: 3-12-12 DATE Application # 1250028537/
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext: 2 Fax: (910) 893-2793 www.hamett.org/permits ' / ** **A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: William & Mary Swassing Mailing Address: 2137 Cypress Rd. City: Cameron State: NC zip: 28326 contact No: 910-638-5033 Email: maryswassing@hotmail.com
0 9
APPLICANT*:
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Phone #
PROPERTY LOCATION: Subdivision: Lot \$1 Lot Size; 20.96
State Road # 103 State Road Name: CYDRES RC Map Book & Page: 675
Parcel: 09 9544 0005 03 PIN: 9544-80-0540,000
Zoning RAD R Flood Zone: X/AEWatershed: TT Deed Book & Page 2924 385 Power Company*:
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Sla
Mod: (Size 27/4"x 7/4") # Bedrooms 3 # Baths 2 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
☐ Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees:
Addition/Accessory/Other: (Sizex) Use: 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: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Required Residential Property Line Setbacks: Comments: 5-1-12 Rev Moved Mod 12 Ft
Front Minimum 35 Actual 40.98 85 705 or ward Cof # 123394
Rear 25 147
Sidestreet/corner lot 7-25-13- ceololed Front pirch
Sidestreev corner tot
on same lot Residential Land Use Application Page 1 of 2 03/11
APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
off 24/27 onto Hillmon Grove Rd. then furn Right onto Cupress Church Rd then turn Right onto Cypress Rd we are second property on Right with dumpster in yord
if permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided. Signature of Owner or Owner's Agent Pate

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



HTE# 12-5-28537 R

Harnett County Department of Public Health

Improvement Permit

26926

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: Cypress Rd. SUBDIVISION LOT # Site Improvements required prior to Construction Authorization Issuance: Mod Type of Structure: Proposed Wastewater System Type: Pomp to 25% Reduction Listen Projected Daily Flow: 760 Number of bedrooms: 2 Number of Occupants: 6 max Basement Tyes No Pump Required: Ves No May be required based on final location and elevations of facilities Type of Water Supply:

Community Public Well Distance from well feet Five years Permit valid for: Permit conditions: ☐ No expiration Date: The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.. Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1950, .1954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. ISSUED TO: William & Mary Swarring PROPERTY LOCATION: Cypress Rd. ☐ Expansion Page Ho 25 % Reduction System (Initial) Wastewater Flow: 360 Basement? Yes No Type of Wastewater System** (See note below, if applicable [Installation Requirements/Conditions Number of trenches Septic Tank Size /000 gallons Exact length of each trench 50 feet Trench Spacing: Pump Tank Size __/OOO gallons Trenches shall be installed on contour at a Soil Cover: Maximum Trench Depth of: 18-20 inches (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: _____ ft. TDH vs. GPM _ inches below pipe Aggregate Depth: ______ inches above pipe inches total WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA. NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA. **If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. Authorized State Agent: Date: 4 Construction Authorization Expiration Date: 4

HTE# 12-5-28577R

Permit # 26926

Harnett County Department of Public Health Site Sketch

ISSUED TO: William & Mary Jwassing SUBDIVISION LOT #
Authorized State Agent: Cup Main NEHS Date: 4/10/2012 5/2/2012
*Contractor to need consider prior to installing system Swamp
Cypress Rd.