Initial Application Date: 3-12-12	Application # 1250028537
COUNTY OF HARNETT RESIDENTIAL LAND USE A Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ex	APPLICATION t:2 Fax: (910) 893-2793 www.hamett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE RECORDED DEED (OR OFFER TO PURCHASE)	_
City: Cameron State: NC zip: 28326contact No: 910-638-5	37 Cypress Kd.
City: Cameron State: VC Zip: 2832(Contact No: 710-638-3	0033 Email: Maryswassing (4) Notman
APPLICANT*: Mailing Address:	
City: State: Zip: Contact No: *Please fill out applicant information if different than landowner	Email:
CONTACT NAME APPLYING IN OFFICE:	Phone #
PROPERTY LOCATION: Subdivision:	Lot #:Lot Size: 20.96
PROPERTY LOCATION: Subdivision: State Road # 103 State Road Name: Cypres Rel Parcel: 099544 0005 03 PIN: 9544	Map Book & Page: 678
TO COL	
Zoning RFBORFlood Zone: X/AEWatershed: The Deed Book & Page 2924 3 *New structures with Progress Energy as service provider need to supply premise number	
New structures with Progress Energy as service provider need to supply premise number	muni Progress Energy.
PROPOSED USE:	Monolithic
□ SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage:_ (Is the bonus room finished? () yes () no_w/ a closet? () yes	
Mod: (Size 27'4"x 71) # Bedrooms 3# Baths 2Basement (w/wo bath) Garage:	
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Gara	ge:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	again de la contraction de contracti
☐ Home Occupation: # Rooms: Use: Hours of Operation	n:#Employees:
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
Water Supply: County Existing Well New Well (# of dwellings using well	
Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist)	
Does owner of this tract of land, own land that contains a manufactured home within five hundred fe	et (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: \ \ \ \ \ \	Other (specify):
Required Residential Property Line Setbacks: Comments:	
Front Minimum 35 Actual 94.98	
15 12550	
Closest Side 153.5 8	

Page 1 of 2
APPLICATION CONTINUES ON BACK

Sidestreet/corner lot Nearest Building on same lot

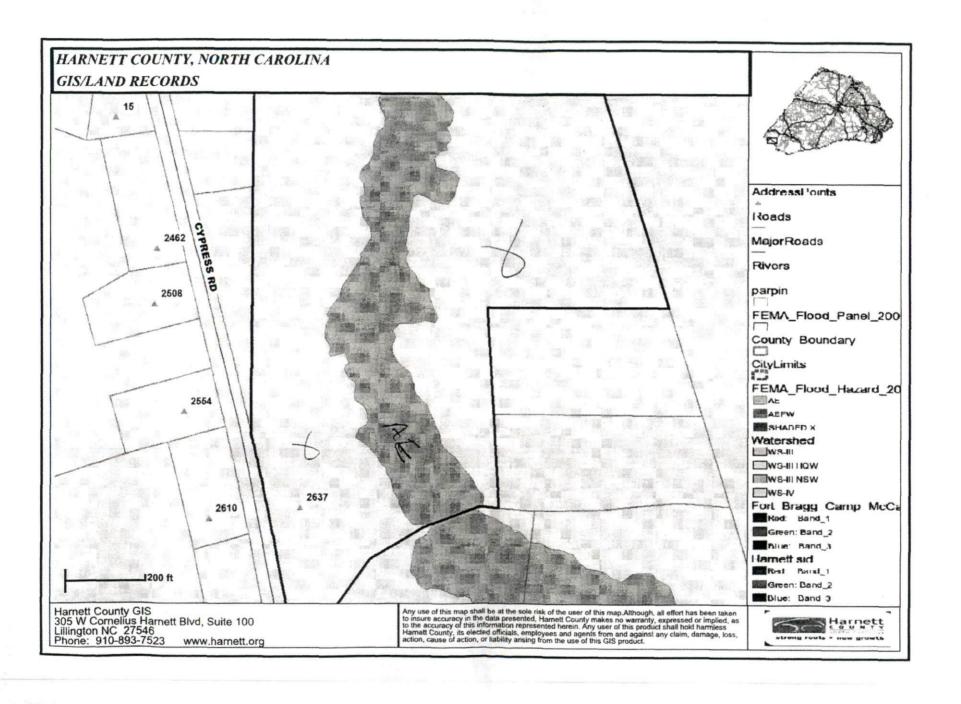
Residential Land Use Application

3/13/12 03/11

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
Of 24/27 onto Hillmon Grove Rd. then turn Right unto Cypress 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 in the state of the stat

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: Willic	in i Mary		APPLICATION #:	1250028537			
NAME: William i May APPLICATION #: 1250028537 *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 #	122249			
Environmental Health New Septic System Code 8 00							
 All property irons must be made v isible. Place "pink p roperty flags" on each comer i ron of lot. All property lines must be clearly flagged approximately every 50 feet between corners. 							
 Place "orange f 	 Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, 						
out buildings, so	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.						
 Place orange E If property is the 	nvironmental Health card I	n location that is easily tal Health requires tha	t vou clean out the un	dergrowth to allow the soil			
evaluation to be	 If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. <u>Do not grade property.</u> 						
 All lots to be a 	ddressed within 10 busin	ness days after confi	rmation. \$25.00 return	n trip fee may be incurred			
 for failure to u After preparing 	ncover outlet lid, mark he	e permitting system at	910-893-7525 option	1 to schedule and use code			
800 (after select	ting notification permit if m	nultiple permits exist) for	or En vironmental Heal	th inspection. Please note			
confirmation r	or IVR to verify results. Or	cording for proof of	request.	for permits			
■ Environmental Hea	th Existing Tank Inspection	ns Cod e 800	a to ocitical i citimaning	ioi pointito.			
 Follow above in 	structions for placing flags	and card on property.		10000			
Prepare for inst	pection by removing soil ownen close back down. (Unle	ver over outlet end	as diagram indicates, a sentic tank in a mobile	nd lift lid straight up (if			
After uncoverin	g outlet end call the voice	permitting system at 9	10-893-7525 option 1 &	& select notification permit if			
multiple pe rmit	s, then u se code 800 for	Environmental Health	ins pection. Please n	ote confirmation number			
given at end o	f recording for proof of re or IVR to hear results. One	equest.	to Central Permitting for	or remaining permits.			
USE CHCK2GOV	Of TVIC to field results. Of	oc approved, present		•			
SEPTIC	on to construct please indicate	decired system type(s): cs	an he ranked in order of pro	eference, must choose one.			
		Conventional					
{} Accepted {} Alternative	{} Other		(_) /,				
			plication if any of the foll	lowing apply to the property in			
question. If the answer is	"yes", applicant must attach	supporting documentation	on.				
LIYES (LINO	Does the site contain any Ju	*					
{_}}YES {NO	Do you plan to have an irrig						
{_}}YES {_UNO	Does or will the building co			1.			
I_TYES _ NO	Are there any existing wells						
{_}}YES {_\topNo	Is any wastewater going to			ge?			
{_}YES {_ } NO	Is the site subject to approv						
{_}}YES {__}NO	Are there any Easements or			a limas?			
{_}}YES {NO	Does the site contain any ex						
	If yes please call No Cuts	at 800-632-4949 to locat	e the lines. This is a free	Service.			
I Have Read This Applica	tion And Certify That The Info	ormation Provided Herein	Is True, Complete And C	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) DATE							
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE							
E-Health Checklis	t	1 of 3		10/10			

39 6 X56
18.20
p. p. 25%