

Initial Application Date: 10-1-16

Application # 1650038861

CU# _____

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****

LANDOWNER: Feliciano Aviler Mailing Address: 5675 Christian Light Rd
City: Ferguson Varina State: NC Zip: 27526 Contact No: 919-398-1326 Email: Avilerroofingnc@gmail.com

APPLICANT*: Same Mailing Address: _____

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: 1.666
State Road # 5845 State Road Name: Christian Light Rd Map Book & Page: 2007, 1051
Parcel: 050634 0038 01 PIN: 0634-92-4445.000
Zoning: RA-30 Flood Zone: X Watershed: - Deed Book & Page: 2477, 367 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size 3434) # Bedrooms 2 # Baths: 1 Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: Slab: _____ Slab: _____
(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: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size _____ x _____) 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: _____ Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>68</u>
Rear		<u>25</u>		<u>25+</u>
Closest Side		<u>10</u>		<u>50</u>
Sidestreet/corner lot		_____		_____
Nearest Building on same lot		_____		<u>35</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

401 Make left on

Christian light Rd go about 7 miles and
property on left

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]
Signature of Owner or Owner's Agent

[Signature] 6-01-16
Date

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 #: 38861

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 # 0116022-LB
0-1-16

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** 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.**
- **All lots to 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.**
- 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 **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** 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 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 now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 YES NO Is any wastewater going to be generated on the site other than domestic sewage?
 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?

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.

Richard Stuck
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

6-01-16
DATE

TAX PARCEL ID NUMBER

Joseph Kent Revels
OWNER/AGENT

DEPARTMENT OF TRANSPORTATION
DIVISION OF HIGHWAYS

NO APPROVAL NECESSARY

C.W. McGEE
DISTRICT ENGINEER *ROP*

12/10/07
DATE

HARNETT COUNTY PUBLIC UTILITIES

PLAT PLAN PRE-APPROVAL ONLY
NOT FOR CONSTRUCTION

WATER IS AVAILABLE TO THIS SITE

VIA LINE LOCATED ON _____

SIGNATURE

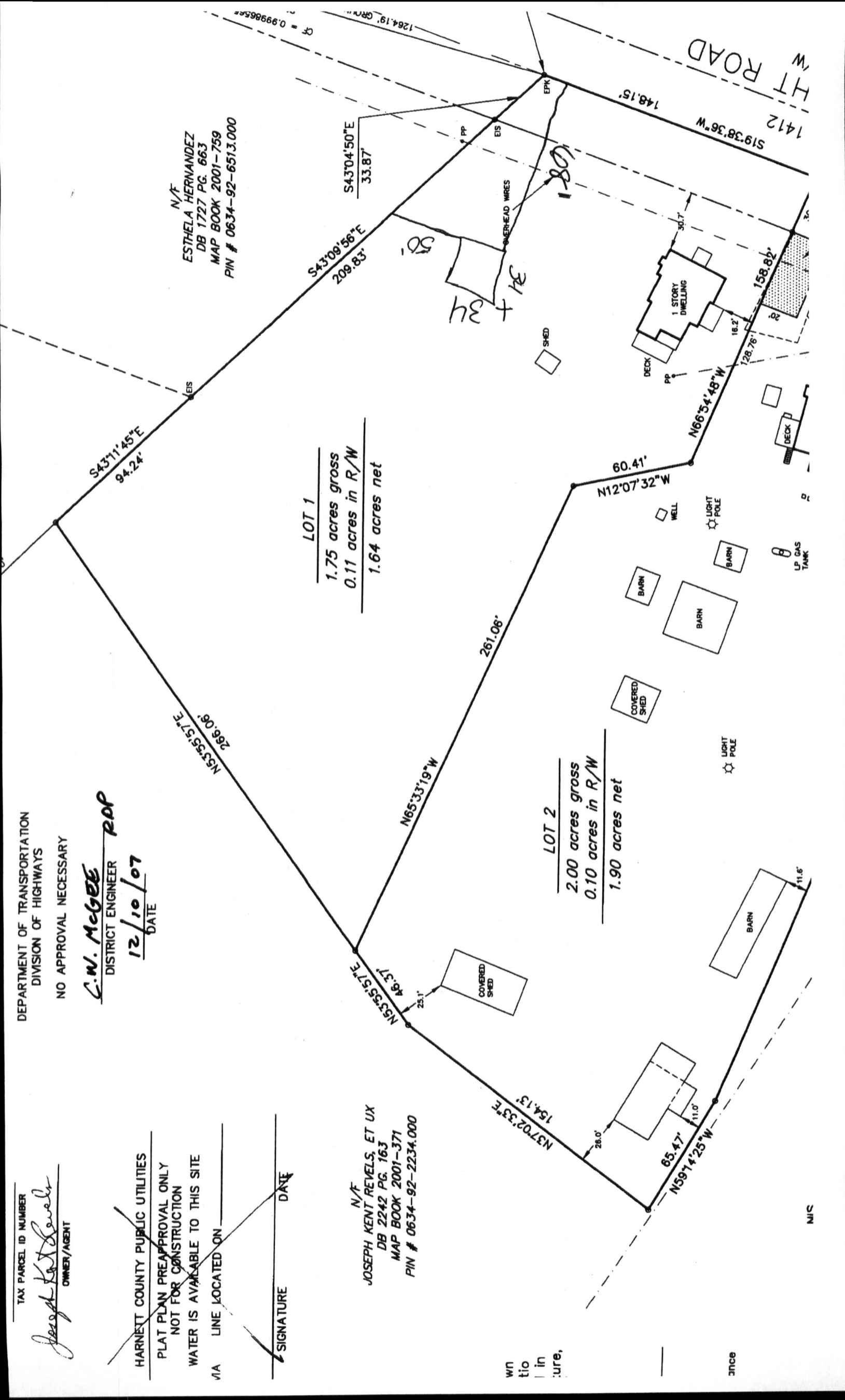
DATE

N/F
JOSEPH KENT REVELS, ET UX
DB 2242 PG. 163
MAP BOOK 2001-371
PIN # 0634-92-2234.000

N/F
ESTHELA HERNANDEZ
DB 1727 PG. 663
MAP BOOK 2001-759
PIN # 0634-92-6513.000

LOT 1
1.75 acres gross
0.11 acres in R/W
1.64 acres net

LOT 2
2.00 acres gross
0.10 acres in R/W
1.90 acres net



WN
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in
ure,

nce

N/C

Application Number 16-50038861 Page 3
Property Address 5845 CHRISTIAN LIGHT RD Date 8/18/16
PARCEL NUMBER 05-0634- - -0038- -01-
Application description CP MOVED HOUSE
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION		/ /
999	820	Z820	PZ*ZONING/FINAL INSPECTION		/ /
Permit type MOVED HOUSE PERMIT					
999	103	B103	R*BLDG FOUND & TEMP SVC POLE		/ /
999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE		/ /
999	113	B113	R*BLDG WATER/DAMP PROOFING		/ /
999	217	E217	R*ELEC RECONNECT		/ /
999	209	E209	R*ELEC TEMP POWER CERT		/ /
999	207	E207	R*ELEC TEMP SERVICE POLE		/ /
999	205	E205	R*ELEC UNDER SLAB		/ /
999	213	E213	R*ELECTRICAL UNDERGROUND		/ /
999	409	M409	R*GAS PIPING		/ /
999	405	M405	R*MECHANICAL UNDERGROUND		/ /
999	105	B105	R*OPEN FLOOR		/ /
999	305	M305	R*PLUMB SEWER CONNECTION		/ /
999	309	P309	R*PLUMB UNDER SLAB		/ /
999	307	P307	R*PLUMB WATER CONNECTION		/ /
999	115	B115	R*OVERHEAD ELEC, MECH, PLB		/ /
999	820	Z820	PZ*ZONING/FINAL INSPECTION		/ /
999	101	B101	R*BLDG FOOTING / TEMP SVC POLE		/ /
999	814	A814	ADDRESS CONFIRMATION		/ /
999	429	R429	FOUR TRADE FINAL		/ /
999	425	R425	FOUR TRADE ROUGH IN		/ /
999	131	R131	ONE TRADE FINAL		/ /
999	125	R125	ONE TRADE ROUGH IN		/ /
999	329	R329	THREE TRADE FINAL		/ /
999	325	R325	THREE TRADE ROUGH IN		/ /
999	229	R229	TWO TRADE FINAL		/ /

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number	16-50038861	Page	4
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PARCEL NUMBER	05-0634- - -0038- -01-		
Application description . . .	CP MOVED HOUSE		
Subdivision Name			
Property Zoning	RES/AGRI DIST - RA-30		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
999	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___

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Application type description CP MOVED HOUSE
Subdivision Name
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Owner	Contractor
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AVILEZ FELICIANO & MELISSA	OWNER
5624 CHRISTIAN LIGHT RD	
FUQUAY-VARINA NC 27526	

Applicant

AVILEZ FELICIANO
5675 CHRISTIAN LIGHT RD
FUQUAY-VARINA NC 27526
(919) 398-1326

--- Structure Information 000 000 34X34 2BDR W/DECK CRAWL
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 2.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW SEPTIC
WATER SUPPLY COUNTY

Permit LAND USE PERMIT
Additional desc
Phone Access Code . 1154459
Issue Date 8/18/16 Valuation 0
Expiration Date . . 2/14/17

Permit MOVED HOUSE PERMIT
Additional desc
Phone Access Code . 1146281
Issue Date 8/18/16 Valuation 115200
Expiration Date . . 8/18/17

Special Notes and Comments
T/S: 06/01/2016 08:43 AM LBENNETT --
5845 CHRISTIAN LIGHT RD
401 MAKE LEFT ON CHIRSTIAN LIGHT RD -
GO ABOUT 7 NILES AND PROPERTY IS ON THE
LEFT
XX
PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB

HARNETT COUNTY CENTRAL PERMITTING

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Date 8/18/16

Special Notes and Comments

INSULATION AND LAND USE.

XX

Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

