

Application

0850020238

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 Fax 910-893-2793

Application for Environmental Health Improvement Permit in Areas Zoned by Municipalities

Land Owner Information:

Name: C&D Metals Inc. dba. T & J Motors
Address: 2219 S. HORNER BLVD.
SANFORD, NC 27331
Phone: 919.775.7751

Applicant Information:

Name: INSTALL INC.
Address: 209 SYCAMORE ST.
SANFORD, NC 27330
Phone: 919.774.0506

Property Location:

E911 Address: 1085 OLD US 421
PIN or Parcel Number: 100549 0331 & 100549 0332, & 100549 0330 & others?
Subdivision: Lot Number:
State Road Number: NCSR # 1291 Lot Size: 8.72 AC. TOTAL

Specific Directions to Job from Lillington: FROM CENTRAL PERMITTING OFFICE, TAKE 421 N AND TAKE OLD US 421 TO THE LEFT, SITE IS APPROX. 1 MILE DOWN ON THE LEFT (T & J MOTORS).

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: x) # of Bedrooms:
Garage: Deck:
() Number of Persons per Household 4 EMPLOYEES
() Business Square Footage Retail Space: Type:
(X) Industry Square Footage: 6,400 Type: Metal Building
() Home Occupation # of Rooms: Use:
() Addition to Existing Building Size: Use:
() Other:

Water Supply: (X) County () Well () Other
Sewer: (X) New Septic Tank () Existing Septic Tank () Revision () Sewer

There is a \$250.00 charge for this service. 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.

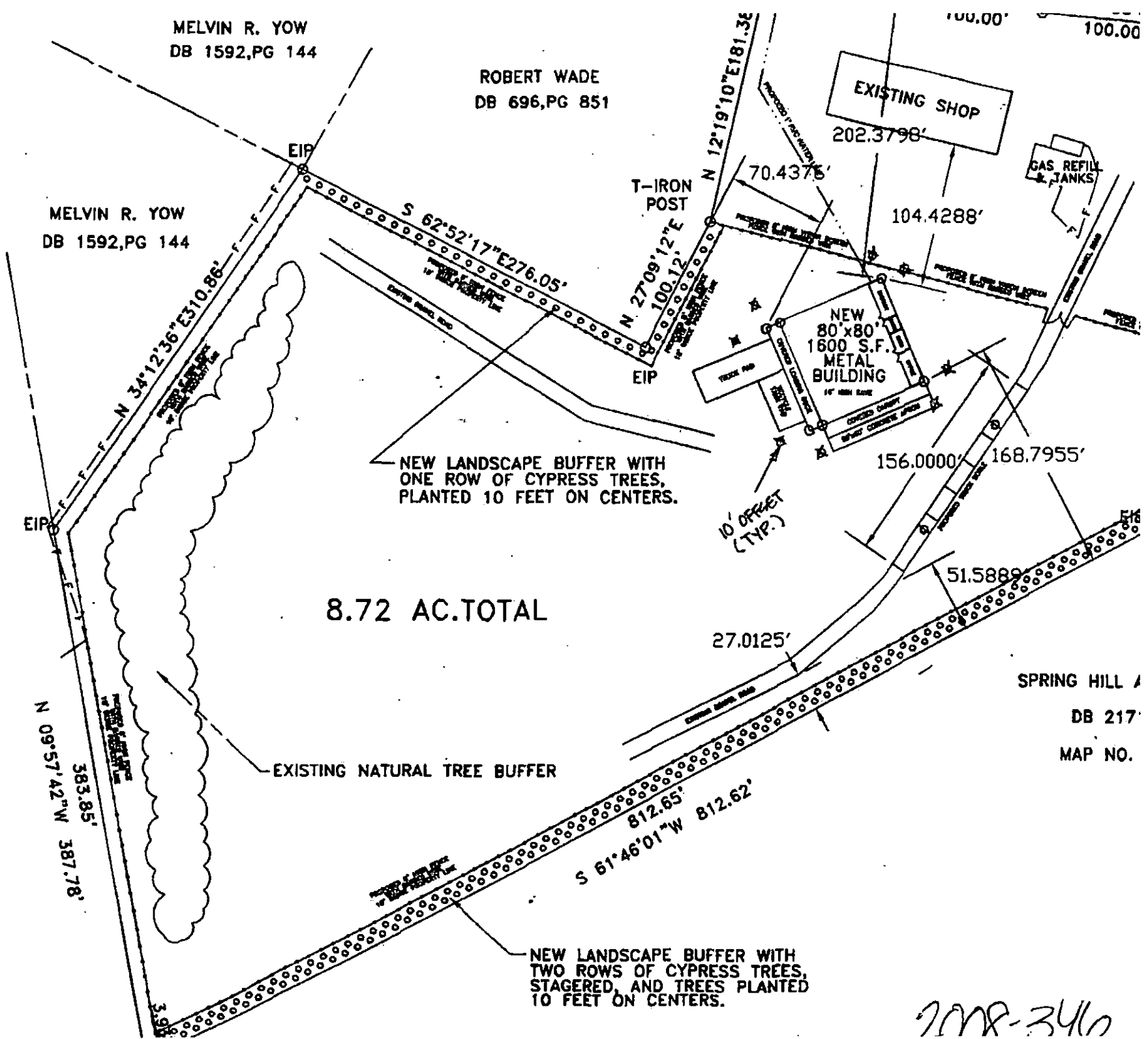
Applicant Signature: [Signature] Date: 10/4/08

MELVIN R. YOW
DB 1592, PG 144

ROBERT WADE
DB 696, PG 851

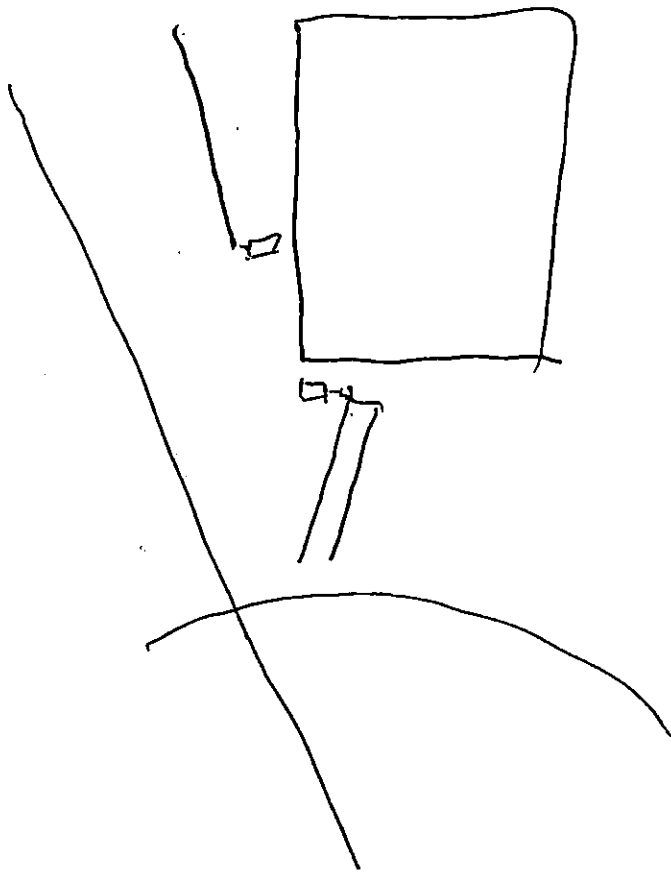
MELVIN R. YOW
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DB 1592, PG 144



SPRING HILL /
DB 217 /
MAP NO.

2008-3410



NAME: C&O METALS, INC.

APPLICATION #: 0850020238

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 # _____

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
 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 Labelling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Stephen K. Christophers CONTRACTOR REPRESENTATIVE 6/4/08
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE

ZONING VERIFICATION
ZONING ADMINISTRATION
 Town of Lillington
 P O Box 296
 106 West Front Street
 Lillington, North Carolina 27546

MAY 21 2008
 A I D

NOTE: This application must be accompanied by a plat plan drawn to scale showing property lines and all buildings and/or signs located on property.
 A Water/Sewer Application MUST accompany all Zoning Verification applications for proposed land use that will require connection to the Lillington water/sewer system.

Application Fee: \$35.00
 Street Address/Location of Property: 1085 OLD US 421 LILLINGTON, NC 27546
 Zoning Property: C-1 C-2 C-3 HI LI MF OI OS R-10 R-20 PUD
 Property Identification Number/Reid Number (Deed Book, Page #, Map Book, Page #): DB 388, #451, MB 8, #11
DB 446, #671, MB 12, #55
DB 468, #31, MB 2005-1063
 Proposed Use of Property: MATERIAL TRANSFER SITE

Nature of Project (Check all that apply):
 Residential Non-Residential New Addition Alteration Move Demolition Filling Grading Dredging
 Water System: Public Private Property Located Within Town Limits? Yes No
 Sewer System: Public Private Property Located Within Flood Plain Area? Yes No

Measurements from Property Lines and Other Structures:
 Front Property Line: 202.38 Feet Left Side Property Line: 262.08 Feet
 Rear Property Line: 168.8 Feet Right Side Property Line: 70.44 Feet
 From Other Structures: 104.43 Feet From Corner Line (if applicable) _____ Feet

- 1. APPLICANT (Owner, Owner's Representative, Architect or Engineer):**
 Name: C & D METALS, INC. dba T & J MOTORS
 Address: 1085 OLD US 421
 Contact Person: SCOT CARPENTER Phone: 919-775-7951
- 2. OWNER(S) OF PROPERTY (If Different from Applicant):**
 Name: _____
 Address: _____
 Contact Person: _____ Phone: _____
- 3. PROJECT DEVELOPER (If Different from Owner):**
 Name: _____
 Address: _____
 Contact Person: _____ Phone: _____

We, hereby certify that all of the information furnished in this application, and all included materials, are true to the best of my/our knowledge.
 Owner/Agent Signature: Jonathan S. Carpenter JONATHAN S. CARPENTER, PRESIDENT Date: 5/20/08

Office Use Only -
 APPROVED COMMENTS: Existing Use
 DENIED
 Flood Map Panel Number: _____ Elevation of Lowest Floor Above MSL: _____
 Zoning Administrator: Johnny R. Burns Date: 5-20-2008