

Revised E 36007

Town of Erwin

Application # 07-50017479R

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: Killa Godwin
Address: 4185 Old Stage Road S.
Erin NC 28339
Phone: 910-897-8261

Applicant Information:

Name: Greg Evans
Address: 4928 Fayetteville Rd.
Raleigh NC
Phone: 919-669-0966

Property Location:

E911 Address: _____
PIN or Parcel Number: PIN 0597-19-4504.000
Subdivision: _____ Lot Number: _____
State Road Number: 1769 NC SR X Lot Size: 32.82± Acres

Specific Directions to Job from Lillington: Travel 421 to ward Erwin.
Turn Right on Old Stage Road Travel to address Lot 4185
will be on left.

Proposed Use:

☒ Single Family Dwelling (Size: _____ x _____) # of Bedrooms: 3
Basement: _____ Basement w/ Plumbing: _____ Deck: _____ Slab or Crawl Space

() Multi Family Dwelling # of Units: _____ # of Bedrooms/Units: _____

☒ Manufactured Home (Size: 44 x 60) # of Bedrooms: 3
Garage: 24x24 Deck: _____

() Number of Persons per Household 5/28 → customer moved home
\$25.00 revision fee

() 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

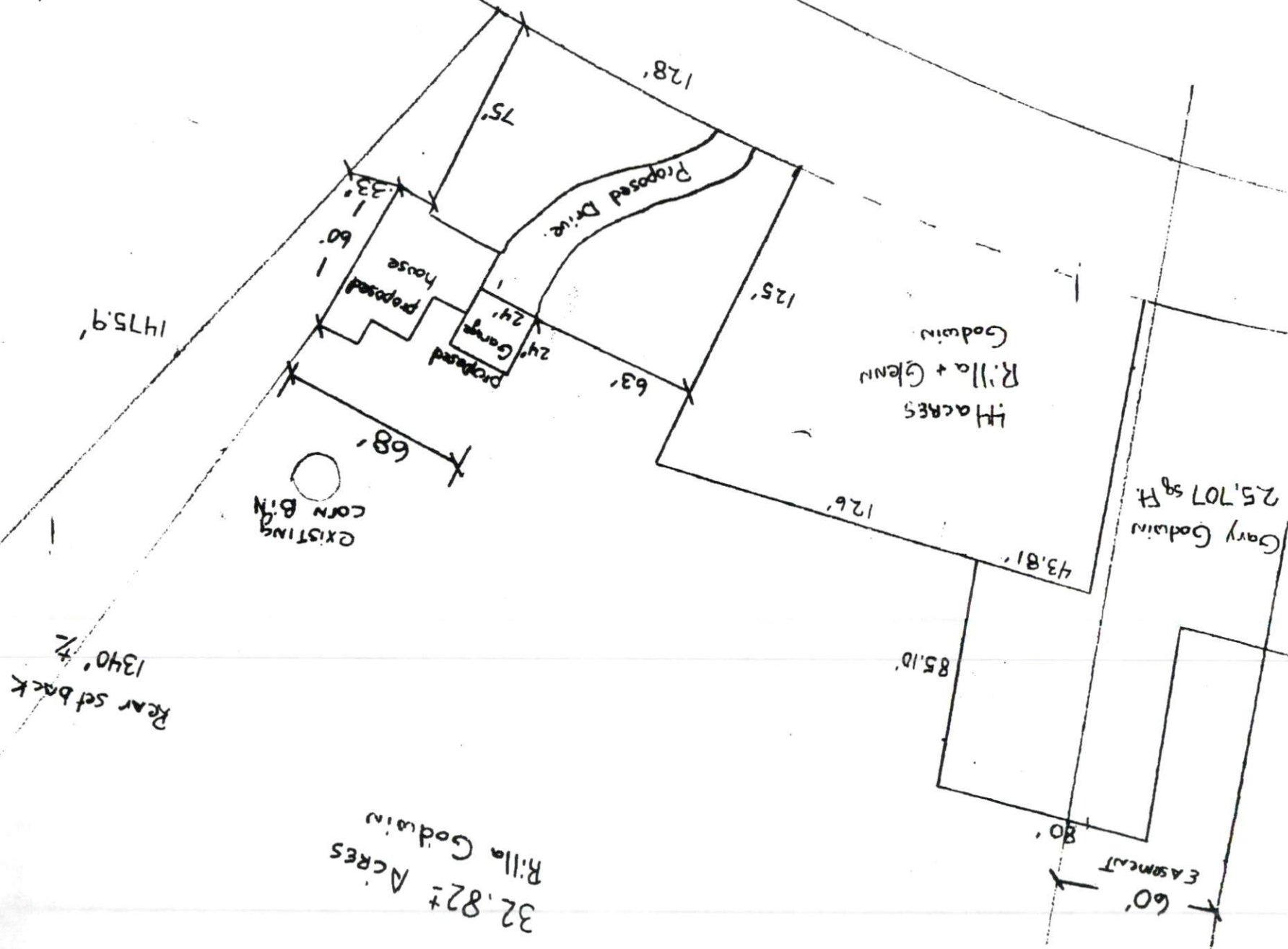
Sewer: ☒ New Septic Tank () Existing Septic Tank () Revision () Sewer

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: Greg Evans

Date: May 2 2007

Revised 5/8/2007
Scale 1:50



OWNER NAME: Rilla Godwin

APPLICATION #: _____

This application to be filled out only when applying for a new septic system.

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)

DEVELOPMENT INFORMATION

- ☒ New single family residence
☐ Expansion of existing system
☐ Repair to malfunctioning sewage disposal system
☐ Non-residential type of structure

WATER SUPPLY

- ☐ New well
☐ Existing well
☐ Community well
☒ Public water
☐ Spring

Are there any existing wells, springs, or existing waterlines on this property?

{ } yes { } no { ☒ } unknown**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
{ } Alternative { } Other _____
{ } Conventional { } Any

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 Does the site contain any existing Wastewater Systems?
{ } 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

May 2 2007