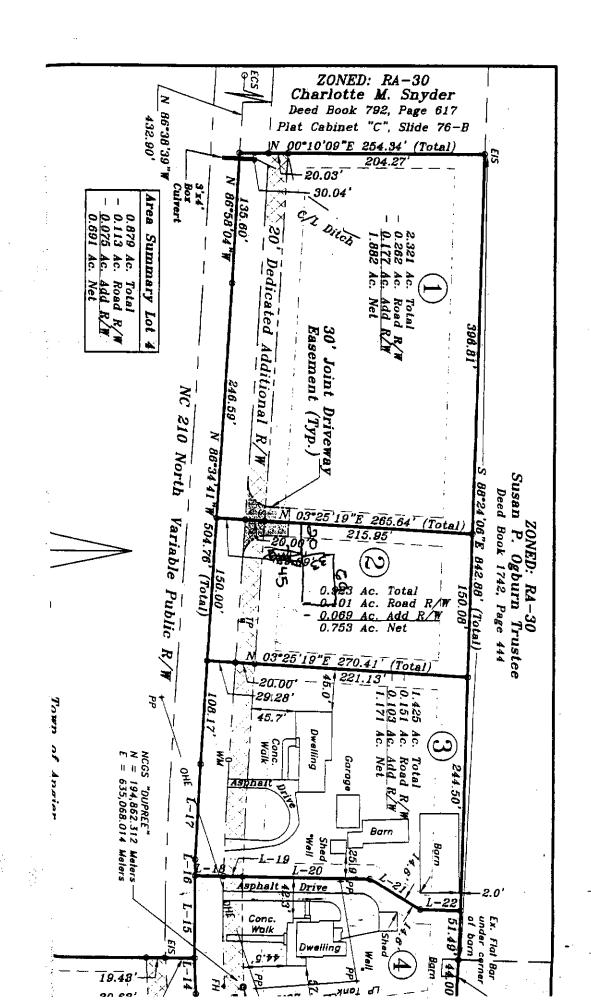
Application # 09 500 22385

## Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

#### Application for Environmental Health Permit in Towns/Areas Zoned by Municipalities

Land Owner Information:	Applicant Information:	
Name: Bernard Young	Name: V=M Properties Inc	
Address: 3485 mosts County Rd	Address:	
Angier NC 2750		
Phone: 949 6 39 - 2934	Phone:	
919 796 - D565		
Property Location: E911 Address:		
PIN or Parcel Number: 154 0683 680	N8 A2	
Subdivision: 14/1/15/20 A Ducago	111 Lot Number: 2	
Subdivision: William A Dunee Lot Size: 82 Ac Zoning: And	Power Co: ?	
Specific Directions to Job from Lillington: NC	210 North Coff	
Proposed Use:		
Single Family Dwelling (Size: <u>G</u> x 3 Basement: Basement w/ Plumbing:	33 ) # of Bedrooms: Slab of Crawl Space	
( ) Multi Family Dwelling # of Units:	# of Bedrooms/Units:	
( ) Manufactured Home (Size: x _ Garage: Deck:	) # of Bedrooms:	
() Business Square Footage Retail Space:_	Type:	
( ) Industry Square Footage:	Type:	
() Home Occupation # of Rooms:	Use:	
( ) Addition to Existing Building Size:	Use:	
( ) Other:		
Water Supply: (1) County () Well () County () Well () County () Well () Complete new tank (Complete new tank	checklist) () Existing Septic Tank () Sewer rexisting tanks. This approval is subject to em changes or if false information is	
Applicant Signature: Remard young	Date: 6-30-09	

NAME: SORTO	end Young		APPLICATION #:	2000
		lled out when applying fo		! ¥
County Health De	" i dis application to be il enartment Annlicatic	ned out when applying to on for Improvement 1	r a sepuc system inspect Permit and/or Autho	on.* orization to Construct
IF THE INFORMATION IN PERMIT OR AUTHORIZA depending upon documentati	N THIS APPLICATION IS FATION TO CONSTRUCT SH. ion submitted. (complete site	ALSIFIED, CHANGED, OR '	THE SITE IS ALTERED, To The permit is valid for either plat = without expiration)	HEN THE IMPROVEMENT 60 months or without expiration
910-893-7525 ( Environmental Hea	option i Ith New Septic System	Code 800	CONFIRMATION #	
<ul> <li>Place "pink pro</li> </ul>	operty flags" on each co		perty lines must be cle	early flagged approximately
	etween corners.			
out buildings, s	wimming pools, etc. Pla	ace flags per site plan de	veloped at/for Central F	driveways, garages, decks, Permitting. assist in locating property.
<ul> <li>If property is th</li> </ul>	nickly wooded, Environm		at you clean out the u	ndergrowth to allow the soil
<ul> <li>Call No Cuts to</li> </ul>	locate utility lines prior	to scheduling inspection.	. 800-632-4949 (This is	a free service)
800 (after selec	cting notification permit i	if multiple permits exist)	for Environmental Heal	1 to schedule and use code th inspection. Please note
		i recording for proof of Once approved, procee		for permits.
□ Environmental Hea	Ith Existing Tank Inspec	tions Code 800	_	ioi poiimo.
		ags and card on property		
	spection by removing s r a septic tank in a mobil		am indicates. Looser	trap door cover. (Unless
<ul> <li>After preparing</li> </ul>	trapdoor call the voice	permitting system at 91		select notification permit if
	s, then use code <b>800</b> f <u>if recording for proof o</u>		h inspection. <u>Please n</u>	ote confirmation number
		<u>n request</u> . Once approved, proceed	to Central Permitting for	or remaining permits.
SEPTIC If applying for authorization	on to construct please indica	ite desired system type(s): c	an be ranked in order of pr	eference, must choose one
{}} Accepted	· ·	(Conventional	•	reference, musi encose one.
•		(	- · · · ·	
		nt upon submittal of this ap		owing apply to the property in
question. If the answer is	yes , applicant must atta-	en supporting documentati	OII,	
{_})YES ()NO	Does the site contain any	Jurisdictional Wetlands?		
[_]YES [_]NO	Do you plan to have an ir	rigation system now or in	the future?	
(_)YES (_)NO		contain any drains? Please	•	
()YES {_}} NO	Are there any existing we	ells, springs, waterlines or '	Wastewater Systems on th	is property?
{_}}YES (NO	Is any wastewater going t	to be generated on the site	other than domestic sewa	ge?
{_}}YES_ {_}NO	Is the site subject to appre	oval by any other Public A	gency?	
1_4YES {_, NO	Are there any easements	or Right of Ways on this p	roperty?	
YES (NO	Does the site contain any	existing water, cable, phor	ne or underground electric	lines?
	If yes please call No Cut	s at 800-632-4949 to locate	e the lines. This is a free	service.
I Have Read This Applicati	ion And Certify That The I	nformation Provided Herein	Is True, Complete And Co	orrect. Authorized County And
State Officials Are Granted	i Right Of Entry To Conduc	ct Necessary Inspections To	Determine Compliance Wi	th Applicable Laws And Rules.
I Understand That I Am So	olely Responsible For The P	roper Identification And La	beling Of All Property Lin	es And Corners And Making
The Site Accessible So Tha	t A Complete Site Evaluation	on Can Be Performed.		
Bernard	yours	REPRESENTATIVE SIG		6-30-09 DATE
PROPERTY OWNERS	OK OWNERS LEGAL	REPRESENTATIVE SIG	NATURE (REQUIRED	DATE





#### Town of Angier, NC Land Use and Property Description

Fees: \$35.8	Ø
Fees: 750'	

Of Crepe	
APPLICATION FOR:  [   Improvement Permit (Septic Tank)    [  Mobile Home lot    [  Conditional Use    [  Satellite Dish Antenna    [  Signs    [  Fences    [  Zoning of Property    [  Subdivision Approval	[ ] Mobile Home Park [ ] Grading Permit [ ] Temporary Permit [ ] Special Use
APPLICANT: Name: 4th fro perties, FNC. Address: 3485 Johnston County Rd Angier, NC. 27501 Phone: 919839 2934 919 796 0565	OWNER: Name: Bernard young Address: 3485 Johns fon County RA Angier M. 27501 Phone: 919639 2934 919 796 0565
PRESENT USE OF PROPERTY VACANT  LOCATION OF PROPERTY Hwy 2/9 N Lot PARCEL NUMBER OF PROPERTY 040683	# 2 0208 03
PROPOSED USE OF PROPERTY  [*] Single Family Dwelling: # Rooms: # Bedrooms [ ] Multi Family Dwelling: # of Units: # Bedrooms [ ] Mobile Home (singel lot): single wide: double wide [ ] Mobile Home Park: Section 16, Zoning Ordinance multiple for the propose section is a single wide: Type [ ] Business: Total # of employees per day Type [ ] Others (specify): [ ] Existing structure: Renovate: Addition:  Attach-site plan showing property lines, location of propose and any existing structure.	s (per unit):Square Feet (per unit) de: st apply e of business Demolish:
	WER
APPLICANT: I certify that all of the statements made in this complete and correct to the best of my knowledge and belinformation may be grounds for rejection of this application are granted right of entry to make evaluations or inspection	ef and are made in good faith. I understand that false. Authorized Inspection Department Representatives
Signature: Bernard young	6/30/2009
ZONING ADMINISTRATOR USE ONLY	zoning district and will be
PERMIT # 2009-124 Sett 5 Par	21001 DATE (130/2009

# TOP Cropo Williams

### TOWN OF ANGIER LAND USE PERMIT

55 NORTH BROAD ST WEST ANGIER, NC 27501-0278 Phone: 919-639-2071 FAX: 919-639-6130

DATE ISSUED: 06/30/2009

PERMIT #: 2009- 124

DISTRICT

TAX MAP PARCEL#

040683 0208 03

LOCATION

**HWY 210 NORTH** 

LOT

**ZONING DISTRICT** 

2

OWNER:

Y & M PROPERTIES, INC.

TOTAL VALUATION

\$ 0

CONTRACTOR:

SUBCONTRACTOR ID/NAME

SUBCONTRACTOR TYPE

TYPE CONSTRUCTION: LAND USE

OCCUPANCY GROUP: LAND USE

FEE CODE

EE CODE

**FEE** 

LAND USE RESIDENTIAL

35.00

TOTAL PAID:

35.00

\*\*PAID IN FULL\*\*

TOTAL AMOUNT:

35.00

REMARKS:

LAND USE PERMIT FOR SEPTIC TANK APPROVAL

(SIGNATURE OF CONTRACTOR/OWNER)

(ISSUED BY)

(DATE)

(DATE)