

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

Land Owner Information:

Name: Jose Sevilla  
Address: 230 METAS RD Clinton  
NC 28328  
Phone: 910-336-7430

Applicant Information:

Name: Jose Zabarriga  
Address: 230 METAS RD  
Clinton N.C.  
Phone: 910-336-7430

Property Location:

E911 Address: 290 Pope Rd Dunn NC  
PIN or Parcel Number: 1515-69-2085.000  
Subdivision: Monte AHO LLC Lot Number: 5  
Lot Size: .53 Zoning: \_\_\_\_\_ Power Co: \_\_\_\_\_

Specific Directions to Job from Lillington: 421 to Dunn to 95  
to Pope Rd on right access from north

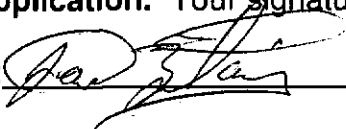
Proposed Use:

- 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: 28 x 52) # of Bedrooms: \_\_\_\_\_  
Garage: \_\_\_\_\_ Deck: \_\_\_\_\_
- 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

Sewage:  New Septic Tank (Complete new tank checklist)  Existing Septic Tank  Sewer

**There is a \$250.00 charge for new tanks, \$100 for existing tanks. 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:  Date: 10-26-09

NAME: Jose Sevilla

APPLICATION #: 23155

**\*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.**

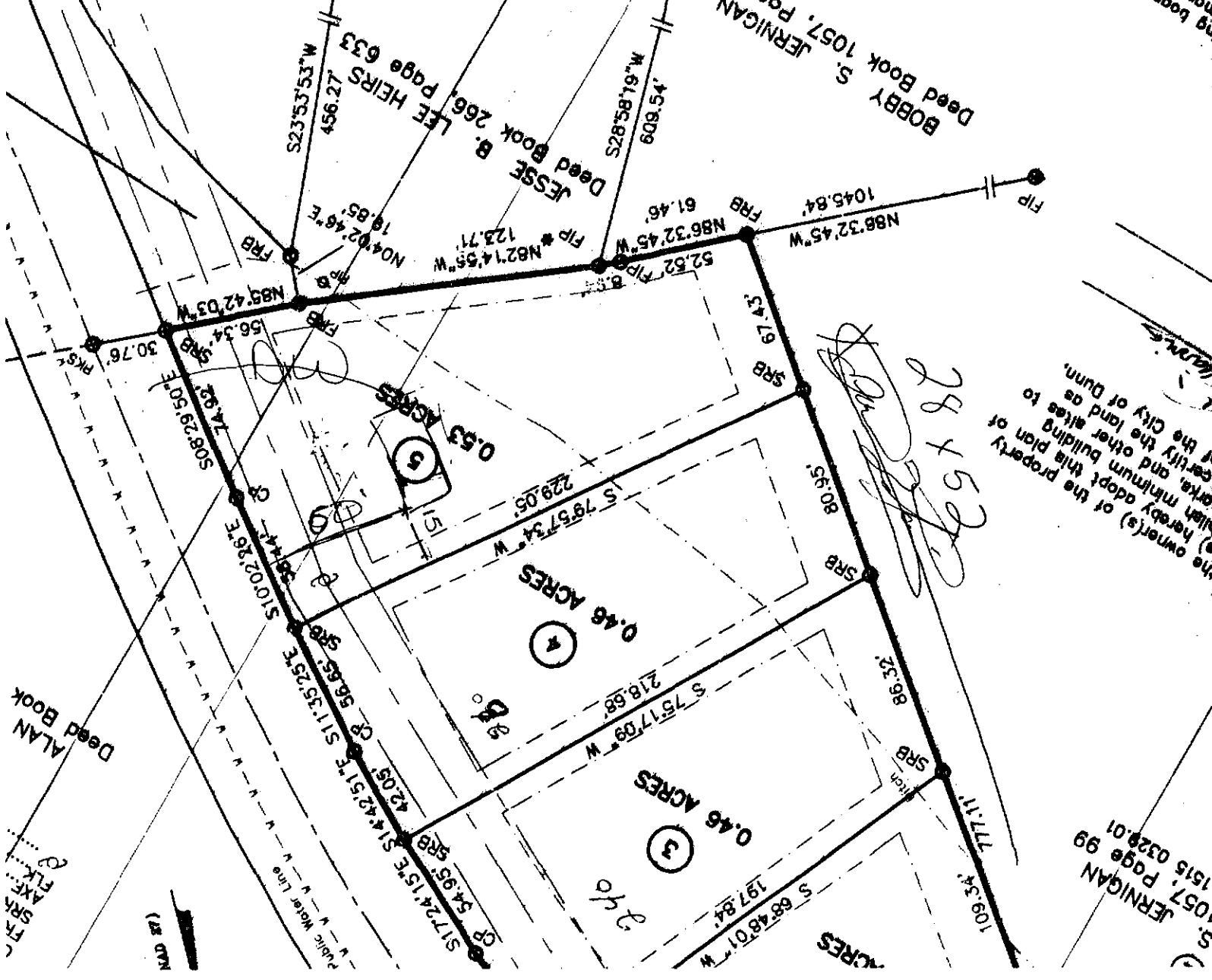
**I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.**

  
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-28-09  
 DATE

NOVEMBER 1925  
 AVERASBORO SURVEY  
 MONTE  
 1625 Charles Newland Road, Godwin,  
 BY: J. SCOTT HARNETT  
 835 Abdolok R.  
 Phone (910)

FOR DIVISION  
 ALTC  
 WINTERS  
 Raymond E. Winters  
 Dead Book 786, Page 65



the board, do hereby certify that said board fully approved this plat on the day of \_\_\_\_\_, 1925.  
 Date \_\_\_\_\_  
 Chairman  
 City Clerk  
 J. Scott Harnett  
 the City of Dunn, North Carolina, do certify that on the day of \_\_\_\_\_, 1925, the streets, easement of dedications, and other building for the plan of the property of the City of Dunn, when minimum building for the land as to take, and other aforesaid to certify the plan of the property of the City of Dunn.

BOBBY S. JERNIGAN  
 Dead Book 1057, Page 99  
 JESSIE B. LEI HEIRS  
 Dead Book 266, Page 633  
 J. S. JERNIGAN  
 1515 0329.01  
 1057, Page 99

**CITY OF DUNN**  
Development Permit

Please attach a plot plan showing lot lines and dimensions, the location and size of all existing and proposed buildings, the distance from each building to property lines, all driveway entrances, parking and loading areas, all existing landscaping (generally).

OWNER TO COMPLETE

**Property Identification Information:**

Property Address: 750 Pole Rd County PIN: 1515-89-8085.000

Subdivision \_\_\_\_\_ Phase \_\_\_\_\_ Lot # 5

Property Owner Name: 555 Sevilla Owner Daytime Telephone: 910 336-7476

Property Owner Address: 230 METZ'S RD Owner Fax Number: \_\_\_\_\_

City/State/Zip Code: CLAYTON NC 27308 Owner Cell Telephone: (910) 336-7430

**Dimensions of Property:**

Width: \_\_\_\_\_

Depth: \_\_\_\_\_

Square Feet: \_\_\_\_\_

Acres: \_\_\_\_\_

**Current Use of the Property:**

- Residential
  - Single Family Residence (Site built or modular)
  - Single Family Residence (Manufactured)
  - Duplex Residence
  - Multiple Family Dwelling (Apartments)
- Commercial Business
- Office
- Manufacturing
- Other

**Proposed Use of the Property**

- Residential
  - Single Family Residence (Site built or modular)
  - Single Family Residence (Manufactured)
  - Duplex Residence
  - Multiple Family Dwelling (Apartments)
- Commercial Business
- Office
- Manufacturing
- Other

**Commercial Business**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

**Office**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

**Manufacturing**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

**Other**  
Type: Vacant Land  
Name of Business: \_\_\_\_\_

**Commercial Business**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

**Office**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

**Manufacturing**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

**Other**  
Type: \_\_\_\_\_  
Name of Business: \_\_\_\_\_

**CITY OF DUNN**  
Development Permit

Existing Building(s):

Vacant Land  
 Building One  
 Width: \_\_\_\_\_  
 Depth: \_\_\_\_\_  
 Current Use: \_\_\_\_\_  
 Building Two  
 Width: \_\_\_\_\_  
 Depth: \_\_\_\_\_  
 Current Use: \_\_\_\_\_  
 Building Three  
 Width: \_\_\_\_\_  
 Depth: \_\_\_\_\_  
 Current Use: \_\_\_\_\_  
Parking Spaces  
 Number spaces provided \_\_\_\_\_

Proposed Project:

New Construction  
 \_\_\_\_\_ Use of Existing Structure  
 \_\_\_\_\_ Modification of Existing Structure  
 \_\_\_\_\_ Addition to Existing Structure  
 \_\_\_\_\_ Additional Building  
 Dimensions of new construction 1456 Square feet of new construction

Connection to Utilities

Electricity  
 \_\_\_\_\_ Public Water \_\_\_\_\_ Private Well  
 \_\_\_\_\_ Public Sewer  Private Septic System  
 \_\_\_\_\_ Storm Water System  
 \_\_\_\_\_ Natural Gas

Owner Certification:

I hereby certify that I am the owner of the above identified property, that the information shown above and shown on the attached plot plan is correct and complete to the best of my knowledge. I understand that all decisions rendered will be based on and enforced according to this information. I understand that this permit, if granted, is issued on the basis of the information supplied by the owner and that this permit may be revoked in the event of any breach of representation or conditions.

Property Owner Signature: \_\_\_\_\_

**ZONING OFFICIAL TO COMPLETE**

MO Resoning Classification

2900SR Required Lot Size  
30FT Required Front Yard Set Back  
20FT Required Rear Yard Set Back  
10FT Required Side Yard Set Back

Floodplain Determination:

Property is not located in a floodplain  
 Property is located in floodplain, but development is not.  
 Development is located in a designated flood hazard area.  
 Panel Number \_\_\_\_\_ Date of Panel \_\_\_\_\_

Parking Spaces

2 Required  
2 Provided

Special Conditions:

must meet all class A manufactured home requirements for city of dunn

Approved: \_\_\_\_\_  
 Denied - Reason: \_\_\_\_\_  
 Signature: James H. Hays Planning Administrator  
 Date: 10-28-09

Receipt Number: \_\_\_\_\_  
 Amount: \_\_\_\_\_