2-19-14

Application # 145033934 Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Permit in Town Zoning/Areas Zoned by Municipalities

Land Owner Information: Name: Kickey Smith SR Address: Lilling two Phone: 910-890-1894 Property Location: E911 Address: No33 NC27 W Parcel Number: 0 0549 12 0103 28 03 Subdivision: Movequity Readty Lot Size: Zoning: Lilling two structures with Property Location:					PIN: 0549-86-5041-000 Lot Number: 3			
MEM	Structures with	Progress Ener	gy must provide premi	se number	from Pro	ogress Energy		
_£	antry s	fore for	ward			7		
Propo	osed Use:	,		*				
X	Single Fam Basement:	ily Dwelling	(Size: <u>26</u> asement w/ Plumbi	x <u>4Z)</u> ng:	# of Bedrooms	: 3 Slab or Crawl Sp	pace	
()	Multi Family	/ Dwelling	# of Units:	·	# of Bedrooms	/Units:		
()	Manufactur Garage:	ed Home	(Size:) Deck:	()	# of Bedrooms			
()	Business	Square Fo	ootage Retail Space	e:	Type:_			
()	Industry	Size:	•	Туре:	l	Jse <u>:</u>	! · · · · · · · · · · · · · · · · · · ·	
()	Home Occu	ıpation	# of Rooms:		_ Use:			
()	Addition to	Existing Buil	ding Size:		_ Use:			
()	Other:							
revoc provi	e is a \$750.00 cation if the i	o cnarge for intended us application.	() Well (septic checklist) r new tanks, \$100 se of the septic sy your signature be	for existing stem changelow certifie	g tanks. This a ges or if false i	approval is sul information is above is corre	oject to ct.	
Ahhiii	cani Signatur	·		\ \ /\/~		ale. 11/8	<u> </u>	



TOWN OF LILLINGTON ZONING PERMIT

Date

Planning & Inspections Department
106 West Front Street, PO Box 296 Lillington NC 27546 • phone 910-893-2654 •fax 910-893-3693

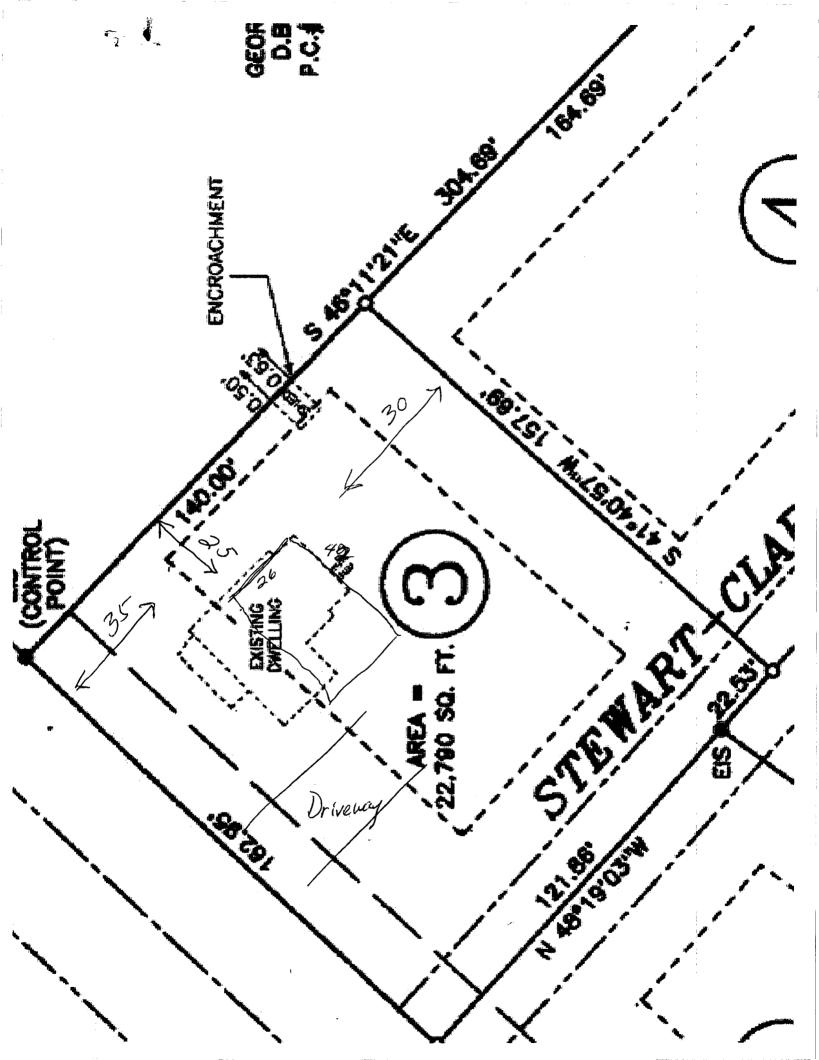
Required Attachments: Submit a site plan showing the driveway, streets, parking, open space, sidewalk, utility lines, major landscape features, and any existing and new structure(s) located in relation to the lot lines.

major minase	ape leatures, a	iiu aiiy	caisting and new sti	iucture(s) located i	ın rei	ation to the lot lines.		
Name of				Property		^		
Applicant	MCNETLL Masonry			Owner	į į	sickey smith sr		
Home Address 2195 Bail			. ,	Home		7		
			en Kd	Address				
City/State			0	City/State				
/Zip	Coat	5	NC 27521	/Zip	(-sllaston NC		
Telephone	910-50	<u> </u>	8432	Telephone	(Collasta NC 310-890-1894		
Email	Calvinic	(i M	eneill Dus	Email				
	· ARmy							
Property Addre	ss:					es property access DOT road?		
1633	Itwy	20	, , , , , , , , , , , , , , , , , , ,					
		_ /	property? Be specific.			Number of dwellings / structures on		
we	s+		- Lat			he property already: 100 E		
Parcel Identification	ation Number	(s):	Stick Ducka Pr			roperty / parcel size:		
0549	-86-5	04	(Single family) Bed Both La			t number(s):		
			Owner / Applican					
AFFIDAVIT: The	undersigned pro	perty c	wner, or duly authoriz	ed agent/representat	ive th	nereof certifies that this application and the		
knowledge and heli	statements, and	ouner 11	Hormation herewith suppression	ibmitted are in all res	spects	s true and correct to the best of their DRMATION SUBMITTED MAY RESULT		
IN THE REVOCAT	FION OF THIS	APPI I	CATION I hereby sut	horize the Town of 1	INFC Illin	gton to review this request and conduct a		
site inspection to in	sure compliance	to this	application. I also und	lerstand that this Zor	ning P	Perpaits will expire six (6) months from the		
date of issuance, if	the permit is not	acted ı	ipon.			July was supply can (s) months from the		
4	•		/ /	1/ 1/1				
moneil	4	Ca	lu A M	8/	~ 19 teb 19			
Print Name Columbia Moscon of Signature of Owner or Representative Date					ative Date			
FOR OFFICE I	USE							
Zoning District: Wa		Watershed District:			I	Is property located in floodplain		
			☐ Not located in	one		according to the FEMA map?		
	4100		☐ Cape Fear - Cı			No ☐ Yes		
Front Setback:	_		Cape Fear - Pr		<u> </u>			
	30 l		La Capercar-11	otected		\sim		
011.0.1.1			npt from Watershed Regulations?			() Don Donnon		
	10	Ехеп		one acre of land		Planner's Signature		
Rear Setback:				ed throughout ent	ire	2-19-14		
			will be distuible	a anoughout the	11 (

(including phases) project area.

Yes, less than one acre

25



NAME: MONE 7	W Masonry	1	APPLICATION #:	
	This application to be	filled out when applying f	or a septic system inspection.	
County Health I	Department Applica	tion for Improvement	Permit and/or Authorizat	ion to Construct
IF THE INFORMATION I	IN THIS APPLICATION IS	FALSIFIED, CHANGED, OR	THE SITE IS ALTERED, THEN T	HE IMPROVEMENT
PERMIT OR AUTHORIZ	ATION TO CONSTRUCT S	SHALL BECOME INVALID.	The permit is valid for either 60 mor	iths or without expiration
depending upon documenta	ation submitted. (Complete	site plan = 60 months; Complet	te plat = without expiration)	
910-893-7525			CONFIRMATION #	-
Environmental H	lealth New Septic Sys	<i>tem</i> Code 800		
All property	irons must be made	visible. Place "pink prop	erty flags" on each corner iro	n of lot. All property
lines must be	clearly flagged approxi	mately every 50 feet betw	een corners.	
Place "orange out buildings	nouse corner flags" at	each corner of the propo	sed structure. Also flag drivey	vays, garages, decks,
Place orange	Environmental Health	race hags per site plan de	eveloped at/for Central Permit	ting.
If property is t	biokly wooded. Enviror	ard in location that is eas	ily viewed from road to assist	n locating property.
evaluation to h	ne performed Inchest	imental Health requires tr	nat you clean out the <u>undergr</u> freely around site. <i>Do not gra</i>	owth to allow the soil
for failure to	uncover outlet lid me	ork house corners and n	nfirmation. \$25.00 return trip roperty lines, etc. once lot c	<u>ree may be incurred</u>
			at 910-893-7525 option 1 to so	
800 (after sele	ecting notification nerm	it if multiple permits eviet) for Environmental Health ins	nection Place note
		recording for proof of requ		pection. <u>I lease note</u>
			ed to Central Permitting for pe	rmits
		spections Code 800	od to contract offiniting for pe	iiii.
		flags and card on property	v	
Prepare for in	spection by removing	soil over outlet end of ta	ank as diagram indicates, and	d lift lid straight up (ii
<i>possible</i>) and	then putilid back in pl	ace. (Unless inspection is	s for a septic tank in a mobile h	iome park)
WHAT ENDINGER OF CHILD OF STREET, WAS A STRE	E LIDS OFF OF SEPTIC	in white the control of	+ 040 000 7505 auties 4 8 del	
			t 910-893-7525 option 1 & seleath inspection. Please note	
	f recording for proof of		eann inspection. Flease note	Commination Humber
		· · · · · · · · · · · · · · · · · · ·	d to Central Permitting for rem	ainina normite
SEPTIC SEPTIC	v or ivit to near results.	. Once approved, proceed	a to Central Fermitting for femi	anning permits.
	ion to construct please indi	cate desired system type(s): c	can be ranked in order of preferenc	e, must choose one.
{}} Accepted	{} Innovative	() Conventional		
•	• • • • • • • • • • • • • • • • • • • •			,
{}} Alternative	{}} Other	44-44-44-4	·	
		ent upon submittal of this ap	pplication if any of the following DOCUMENTATION:	apply to the property in
{_}}YES {NO	Does the site contain a	ny Jurisdictional Wetlands?		
{_}}YES	Do you plan to have an	irrigation system now or in	the future?	
{_}}YES {NO	Does or will the building	ng contain any <u>drains</u> ? Pleas	e explain	-

[] 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 Enduation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

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

{___}}YES

Selected Parcel Feature		
PIN	0549-86-5041.000	
PID	10054912010328 03	
[REID]	0066926	The transfer teather than the second
OWNER INFORMATION		
[AccountNumber]	1500004258	
[Name1]	SMITH RICKEY E SR	-
[Name2]	And the second s	
[Address1]	311 WOMBLE DRIVE	
[Address2]	Antiferror contraction and the first and the second and the first and th	
[Address3]	The state of the s	
[City]	LILLINGTON	
[State]	NC	
[ZipCode]	27546	
ASSESSMENT INFORMATION	In additional production for the control of the con	Construction of the Constr
[ParcelBuildingValue]	·	
[ParcelObxfValue]		
[ParcelLandValue]	ISONO	
[TotalAssessedValue]	Toda and the control of the control	
PARCEL INFORMATION	The property of the contract o	
[HouseNumber]	001633	
[UnitNumber]	end decade and the plant of the contract of th	
[StreetDirection]	Control that the second is a second to the control of the control	
[StreetName]	NC 27	
[StreetType]	And the second s	
[StreetSuffix]		
[ParCity]	the contraction of the contracti	i
[LegalDescription]	LT#3 MOREQUITY REALTY INCMAP#2007-90	
[LegalLandUnits]		
[LegalLandType]	LT	0.000
[PlatBook]	2007	
[PlatPage]	0090	
STRUCTURE INFORMATION	THE CONTROL OF CONTROL	and a construction of
[ActualYearBuilt]		
[ActualAreaHeated]	The state of the s	The state of the s
SALES INFORMATION	## contribution and an anti-definition of the contribution of the	Constitution of the second sec
[Deed Book]	02957	
[DeedPage]	0236	
[Deed Date]	2012-02-14 19:00:00	e man et al. alors et a comparation of
[SalePrice]	23000	to any or any or any or any
PARCEL LINKS	* And reference of the last and application of the second	t - maritani, pamirinani, inf
PRC	Click here for 10054912010328 03	
ZONING OVERLAY	Click here for 10054912010328 03	i
SOILS OVERLAY	Click here for 10054912010328 03	

2-19-14

Application # 1450032934R

Harnett County Central Permitting PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Permit in Town Zoning/Areas Zoned by Municipalities Land Owner Information: Applicant Information: Name: Kicken Name: McMosi Address: Address: 2/90 / Phone: Property Location: State Road#: N C み W E911 Address: 1633 NC27 W Parcel Number: 10 0549 12 01032803 PIN: 0549-86-5041.000 Subdivision: Moreouty Realty Lot Number: Zoning: Lillington Power Co*: * New structures with Progress Energy must provide premise number from Progress Energy Specific Directions to Job from Lillington: 27 Hwy out of fown by Partry Store toward Proposed Use: Single Family Dwelling (Size: 26 x 42) # of Bedrooms:____ Basement: _____ Basement w/ Plumbing: ___ Deck: ____ Slab or Crawl Space # of Units: # of Bedrooms/Units: () Multi Family Dwelling (Size: _____ x ____) # of Bedrooms:_____ Manufactured Home () Garage: Deck: Square Footage Retail Space: Type:______ Business () Size: Type: Use: Industry () # of Rooms: ____ Use:_____ Home Occupation () Addition to Existing Building Size:_____ Use:____ SCANNED () () Other: ______ Water Supply: (X) County () Well () Other Sewage: (X) New Tank (Complete septic checklist) () Existing Septic (Complete septic checklist) () Sewer There is a \$750.00 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. Date: 19 17 14 Applicant Signature:



Side Setback:

Rear Setback:

25

TOWN OF LILLINGTON ZONING PERMIT

Planner's Signature

Date

Planning & Inspections Department 106 West Front Street, PO Box 296 Lillington NC 27546 • phone 910-893-2654 • fax 910-893-3693

Required Attachments: Submit a site plan showing the driveway, streets, parking, open space, sidewalk, utility lines, major landscape features, and any existing and new structure(s) located in relation to the lot lines.

Name of				Property			
Applicant	MCNETLL Masonry			Owner	Rickey Smith SR		
Home Address 2195 Bail				Home	7	٦	
			Kd	Address			
L City/State L				City/State	(11 1		
Zip Coats NC			2752	/Zip	CSIIngton NC		
Telephone 910-591-8432				Telephone	910-890-1894	-	
Email Calvin, a. mc			ill Dus	Email			
	· ARMY.	mil					
Property Addre	ss:	Wha	t are you requ	uesting to build	Does property access DOT road?		
1633	Itwy à	- /		osed use of the	Number of dwellings / structures on		
	, ,	prope	erty? Be specia	fic.		'	
we			C1L	Build	the property already: 100 E		
Tarcer Identification (Valider(s).					Property / parcel size:		
0549-86-504 (Single family				3 Bed 2 Both	Lot number(s):		
				0 -		_	
A FEED AND TO				t Must Read and			
					ive thereof certifies that this application and the spects true and correct to the best of their		
					INFORMATION SUBMITTED MAY RESULT	Г	
IN THE REVOCAT	TION OF THIS A	APPLICATIO	N. I hereby aut	horize the Town of I	Lillington to review this request and conduct a		
site inspection to in	sure compliance	to this applica	ition. I also und	erstand that this Zor	ning Permits will expire six (6) months from the		
date of issuance, if	the permit is not	acted upon.	/)	/1	//		
man . A	00		10	1. 1 1	k/k	1	
Print Name Calin A Molin 19 7eb Signature of Owner or Representative Date						7	
Print Name		1	Signature of	Owner or Repre	sentative Date		
FOR OFFICE	USE						
Zoning District:	1	Watershad	Diatrict		In managery logget 1 in G = 1.1 in	_	
Zoning District: Wa			ershed District: Not located in one		Is property located in floodplain		
	KAU		ape Fear - Ci		according to the FEMA map? ☑ No ☐ Yes		
-			ape Fear - Cr		ET NO LIES	\dashv	

Exempt from Watershed Regulations?

Yes, less than one acre

No, more than one acre of land

(including phases) project area.

will be disturbed throughout entire

