

Initial Application Date: 7/22/15 ~~4/18/17~~ 5/5/17 John C. ERN Application # 15-50036690 RR
CU# _____

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext.2 Fax: (910) 893-2793 www.harnett.org/permits
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: STEVE CHRISP Womack Enterprises, Inc - DBA Country Fair Homes
Mailing Address: 189 MCIVER ST 3335 NC 87
City: ANGIER Sanford State: NC Zip: 27501 Contact No: 919-753-4402 Email: _____

APPLICANT: Kimberly Harrington
Mailing Address: 846 Red Hill Church Rd
City: DUNN State: NC Zip: 28334 Contact No: 910494-9704 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Kimberly Harrington Phone # 910 494-9704

PROPERTY LOCATION: Subdivision: Red Hill ch. Rd Lot #: 6 Lot Size: 7.10 of acre
State Road #: _____ State Road Name: 421 Map Book & Page: 2005 / 0263

Parcel: 021507 0323 03 PIN: 1507-47-5789-000
Zoning: Erwin RD Flood Zone: X Watershed: NA Deed Book & Page: 0239210473 Power Company*: Duke

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size x) # Bedrooms: # Baths: Basement(w/w bath): Garage: Deck: Crawl Space: Slab: Slab:
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
- Mod: (Size 32 x 76) # Bedrooms: 3 # Baths: 2 Basement (w/w bath): Garage: Site Built Deck: On Frame Off Frame
(Is the second floor finished? () yes () no Any other site built additions? () yes () no ✓ porch on front)
- Manufactured Home: SW DW TW (Size x) # Bedrooms: Garage: (site built?) Deck: (site built?)
- Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
- Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
- Addition/Accessory/Other: (Size x) Use: Closets in addition? () yes () no

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
Sewage Supply: New Septic Tank (Complete Checklist) _____ Existing Septic Tank (Complete Checklist) _____ County Sewer

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no
Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): Single family dwellings: proposed Modular Home Manufactured Homes: Other (specify):

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>100</u>	<u>40</u>
Rear	<u>113</u>	<u>40</u>
Closest Side	<u> </u>	<u>12</u>
Sidestreet/corner lot	<u> </u>	<u> </u>
Nearest Building on same lot	<u> </u>	<u> </u>

Comments: Customer is changing this back to a 3 bedroom home - no revision fee - 5/5/17

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 TO RED HILL CH RD TURN LEFT THAN GO APPROX QUARTER OF A MILE LOT ON RIGHT

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

X Charles D. [Signature]
Signature of Owner or Owner's Agent

7/15/15
Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

This application expires 6 months from the initial date if permits have not been issued

NAME: Charles Fordham

APPLICATION #: 15-5036690

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 # 011124

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** 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.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- 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 **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** 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.

Charles D Fordham
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7/15/15
DATE



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Kimberly Harrington	Property Owner	11
Home Address	846 Red Hill Church Rd	Home Address	67
City, State, Zip	Dunn, NC 28334	City, State, Zip	66
Telephone	910 494-9764	Telephone	11
Email	khdeejay@yahoo.com	Email	11

Address of Proposed Property: 846 Red Hill Church Rd, Dunn, NC
 Parcel Identification Number(s) (PIN): 1507-47-5781-22
 Estimated Project Cost: _____

What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.

PAID

Description of any proposed improvements to the building or property

New modular home APR 17 2017

What was the Previous Use of the subject property?

Vacant lot

Does the Property Access DOT road?

YES

Number of dwelling/structures on the property already

0

Property/Parcel size

.68

TOWN OF ERWIN

Floodplain SFHA Yes No Watershed Yes No Wetlands Yes No

Existing/Proposed Septic System Or Existing/Proposed County/City Sewer

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Print Name: Kimberly Harrington
 Signature of Owner or Representative: *Kimberly Harrington*
 Date: 4-17-2017

For Office Use

Zoning District	RD
Front Yard Setback	40'
Side Yard Setback	12'
Rear Yard Setback	40'

Existing Nonconforming Uses or Features: No
 Other Permits Required: Conditional Use Building Fire Marshal Other
 Requires Town Zoning Inspection(s): Foundation Prior to C. of O.
 Zoning Permit Status: Approved Denied
 Fee Paid: \$10 Date Paid: 4/17/17 Staff Initials: JB

Comments: New modular home

Signature of Town Representative: *Dino Bask*
 Date Approved/Denied: 4/17/17

pd cash

