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Application # 15500 37419

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

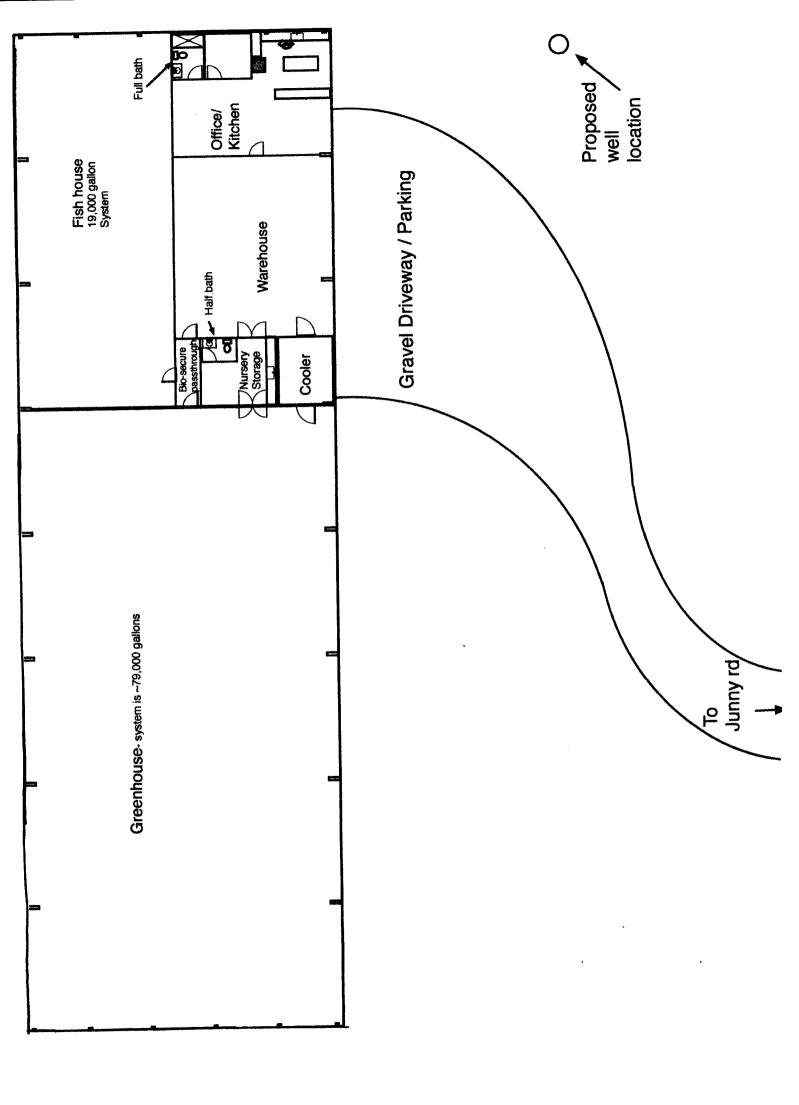
Name of Clark to 100	Applicant Information: Name: Eric Woods Address: 4821 Cypress Ford Or Fuguay Varing, NC 27524 Phone: 1 919-345-1864
Subdivision: Lot Size: 11-75 tores * New structures with Progress Energy must provide premise our	Lot Number: Power Co*: mber from Progress Energy
Specific Directions to Job from Lillington: 210 to Antake Rt on Junny Rd propert	y is on left behind 557 Junnyk
Proposed Use:	
() Single Family Dwelling (Size: x Basement: Basement w/ Plumbing:_) # of Bedrooms: Deck: Slab or Crawl Space
() Multi Family Dwelling # of Units:	# of Bedrooms/Units:
() Manufactured Home (Size: x Garage: Deck:	mare of Bloc
() Business Square Footage Retail Space:	
() Industry Size: Type	:Use: (e) ! !
() Home Occupation # of Rooms:	Use:
() Addition to Existing Building Size:	Use:
Water Supply: () County (Well () Ot	ise: Shop
Water Supply: () County () Well () Ot Sewage: () New Tank (Complete septic checklist) () Ex There is a \$750.00 charge for new tanks, \$100 for revocation if the intended use of the septic system provided on this application. Your signature below	cisting Septic (Complete septic checklist) () Sewer existing tanks. This approval is subject to n changes or if false information is certifies all information above is correct.
Applicant Signature:	Date: 11/5/2015

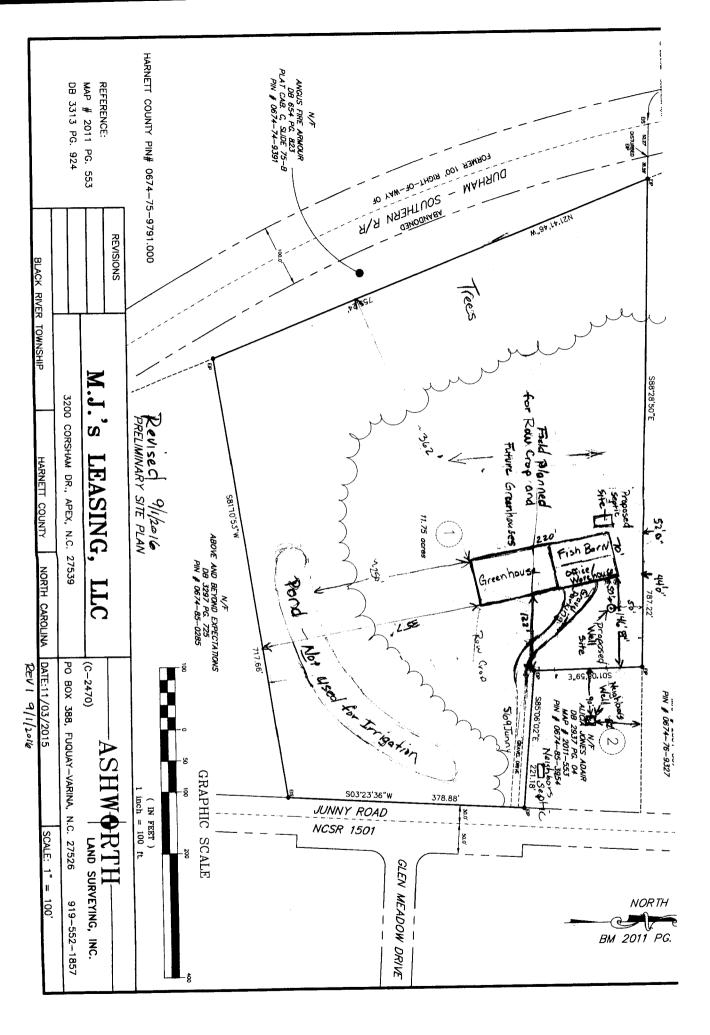
Jennifer Bro	ock
From: Sent: To: Subject:	Eric Woodall <eric@inseasonaquaponics.farm> Monday, September 19, 2016 11:39 AM Jennifer Brock Re: Septic/well permit follow up for Junny rd. in Angier</eric@inseasonaquaponics.farm>
Hey Jennifer, Thanks again combination	for all your help with the well permit. Here is the application we filled out last year. Also, the for the lock on the gate at the property is: 26-28-19.
	Harnett County Department of Public Health
	Well Construction Permit Application
	If the information in the application for a Well Construction Permit is fabilited, changed, or the site is altered, then the Well Construction Permit shall become invalid.
	APPLICANT INFORMATION Exc Wooded Mi's Leasure 1919, 345-1864 Applicant/Owner Phone Number 4621 Cypers Ford of Traying Varies AC. 27526 Street Address, City, State, Zip Code
	The Applicant must inhand a Note Plan. The hite Plan is a snapshrawing of the property and must show: 1 this long and or proposed property loves and concretoris with determinents. 2 the locations of the facility and appuremance: 3 the locations of the facility and appuremance: 4 the location of the interior of continuents of the property of the proposed systems within 1600 fact of the proposed mell. 5 the location of any statisting wells websit 160 fact of the property surface water business. 6 above ground and or indictationed senage lanks. 7 and any other havens notice or continuents waters 100 fact of the proposed well as to the property of the property.
	The Applicant shall notify the Harmett County Health Director through or by way of the Harmett County Division of Environmental Health II any of the Inflorming occur prior to well countraction dure to a releasation of the proposed facility, dure to a releasation of the proposed facility, three to a releasation of the facility three to a read for mistalling the waste water a seem on one other than subscried on the facility three to a need for mistalling the waste water a seem on other than subscried on the facility Contact information: Environmental Health Division = 910-893-7547
	Proposed use of well Proposed use of well Business) Irrigation
	Street Address Juny RCL. Subdivision/Lot # 1 Parcel 8(44 14.74 505 8 00 PIN # 06.74.74.4391 Directions to the Site
	DHYLLIAN IS IN THE TAKE

Eric

On Sep 13, 2016, at 10:27 AM, Jennifer Brock < jbrock@harnett.org > wrote:

Ok, I have pulled the file & have it on my desk. I'll be waiting to hear from you with the card information on the revision & also about the well.





NAME:	Ø 1	Tric	Wool	dall	_	MJ'	's Lea	sing				API	PLIC	CATI	ION :	#:	<u>3</u>		41	9	
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•	• If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property .																				
• • <i>En</i>	800 conf	(after <u>firmati</u> Click	selection num 2Gov o	ing noti nber giv or IVR to	fication fic	on per <u>t end c</u> ifv resu	rmit if of reco ults. (multip ording Once a	ole pei for pr approv	rmits ex oof of re red, pro	eques ceed	or E	Enviro	OHIII	ema	ПСа	U(11 1116	spec	,tioii.	Pleas	e note
 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. 																					
SEPTION If apply	<u>C</u> vino fa	or auth	orizatio	n to cons	truct i	please i	indicat	te desire	ed syste	em type(s): cai	an be	e rank	ed in	orde	r of pr	eferen	ice, m	nust cl	hoose or	ne.
SEPTIC If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose of the system type(s) and the system type(s) are the system type(s). Accepted [2] Accepted [3] Any																					
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The appropriate question	plican n. If	t shall the an	notify swer is	the local "yes", ap	healt plica	h depa int MU	rtmen JST A	it upon	submi H SUI	ttal of th	is app ING I	plica DO	ation i	if ang IEN	y of t FAT l	he fol ION:	llowin	g app	ply to	the pro	perty in
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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 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) ///3/2015 DATE

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