

Initial Application Date: 11-5-15

**Info  
Sheet**

Application # 1550037421

CU# \_\_\_\_\_

**COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION**

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

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

LANDOWNER: Precision Siding Mailing Address: 490 E. Cornelius Harnett Blvd

City: Lillington State: NC Zip: 27546 Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

APPLICANT: CBSI Mailing Address: P.O. Box 405

City: Smithfield State: NC Zip: 27577 Contact No: Danny 919-631-9221 Email: carbldsys@aol.com

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: CBSI INC Phone # 919-631-9221  
Danny Harden

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: 1 Lot Size: 7.38

State Road # SR 1811 State Road Name: Bud Hawkins Rd Map Book & Page: 3241 / 661

Parcel: 021514 6650 PIN: 1515-48-9178.000

Zoning: Dur Flood Zone: X Watershed: NA Deed Book & Page: 3241 / 661 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/wo 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) Monolithic

Mod: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Basement (w/wo bath) \_\_\_\_\_ Garage: \_\_\_\_\_ Site Built Deck: \_\_\_\_\_ On Frame \_\_\_\_\_ Off Frame \_\_\_\_\_  
(Is the second floor finished? ( ) yes ( ) no Any other site built additions? ( ) yes ( ) no

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: New Ext Buildings? Closets in addition? ( ) yes ( ) no  
Added to basement

Water Supply: \_\_\_\_\_ County \_\_\_\_\_ Existing Well \_\_\_\_\_ New Well (# of dwellings using well \_\_\_\_\_) \*Must have operable water before final metal

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: \_\_\_\_\_ Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

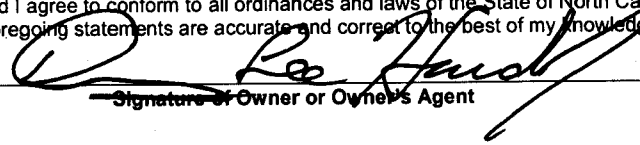
**Required Residential Property Line Setbacks:**

Front	Minimum	Actual
Rear	_____	_____
Closest Side	_____	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: Customer wants new system - an old system is there but they don't think it will work out for what they need. Call Danny before going out - 919-631-9221

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

  
\_\_\_\_\_  
Signature of Owner or Owner's Agent

11-5-15  
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: CBS I

APPLICATION #: 37421

**\*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

- **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.**

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-5-2015  
DATE

**LEGEND:**

- EP ..... Existing Iron Pipe
- SIP ..... Set Iron Pipe
- FCM ..... Found Concrete Monument
- FPK ..... Found P.K. Nail
- EIS ..... Set P.K. Nail
- SRB ..... Existing Iron Stake
- R/W ..... Set Rebar
- CL ..... Right of Way
- CP ..... Centerline
- CP ..... Computed Point
- FRS ..... Found Railroad Spike
- SRSS ..... Set Railroad Spike
- AXF ..... Found Axle
- FLK ..... Found Lightwood Knot

**IE LEGEND:**

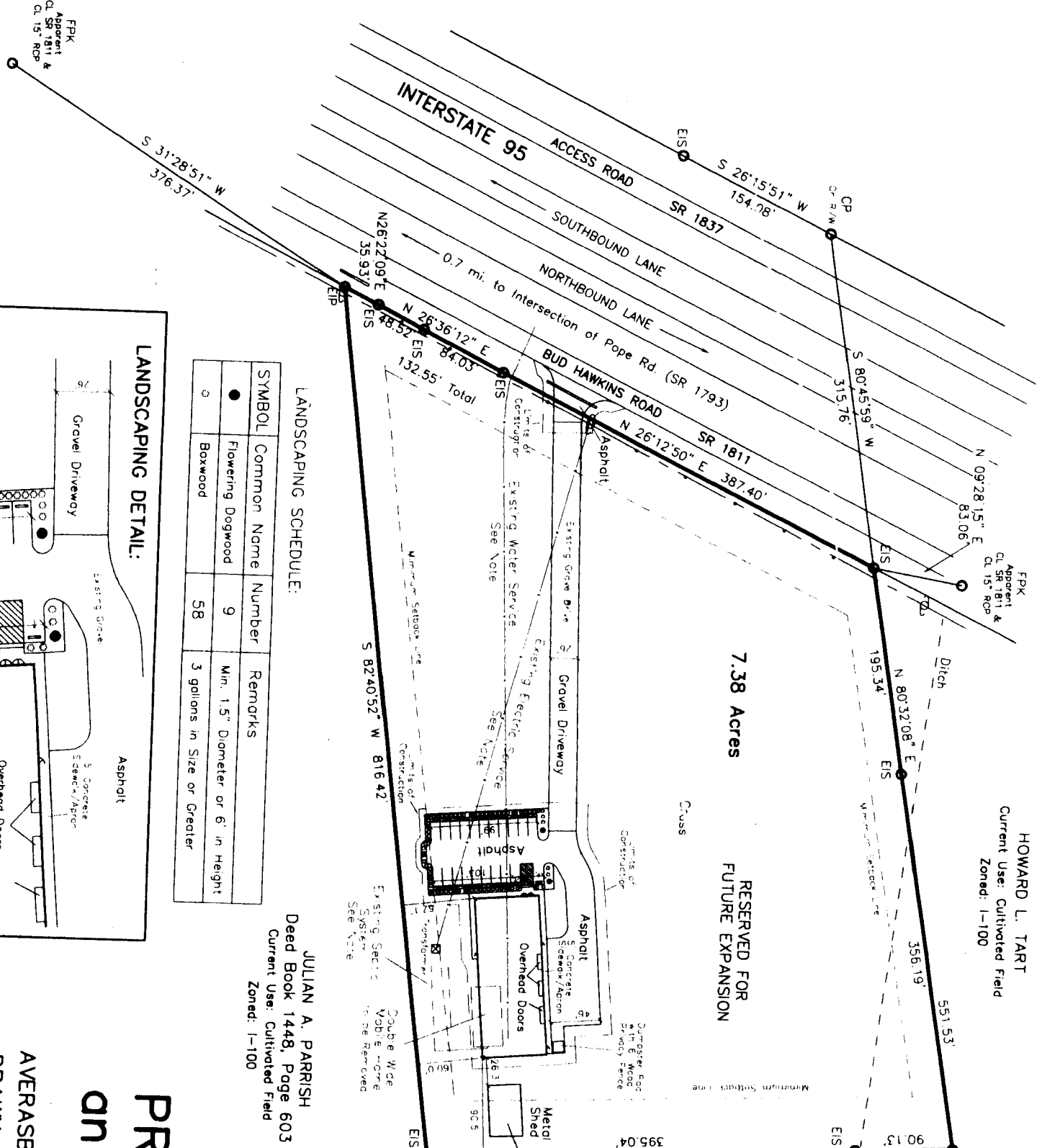
- Subject Tract Surveyed
- Subject Tract Not Surveyed
- Lot Lines
- Easement Line
- Road Centerline
- Surveyed Lines, R/W or Tie Line
- Not to Scale

**IED: I-100**

**AUM SETBACK REQUIREMENT**

- 30'
- 50'
- Adjoining Residential Area
- 50'
- Adjoining Residential Area

- UM LOT WIDTH: 300'
- UM LOT DEPTH: 300'
- UM LOT AREA: 100,000'



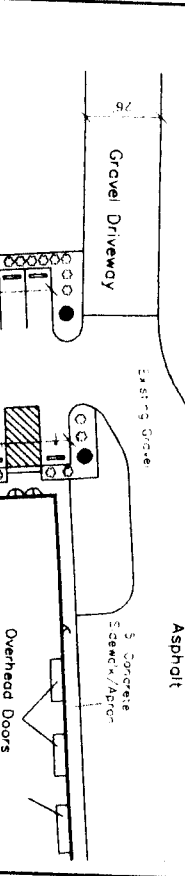
**HOWARD L. TART**  
 Current Use: Cultivated Field  
 Zoned: I-100

**7.38 Acres**  
 RESERVED FOR  
 FUTURE EXPANSION

**LANDSCAPING SCHEDULE:**

SYMBOL	Common Name	Number	Remarks
●	Flowering Dogwood	9	Min. 1.5" Diameter or 6' in Height
□	Boxwood	58	3 gallons in Size or Greater

**LANDSCAPING DETAIL:**



**JULIAN A. PARRISH**  
 Deed Book 1448, Page 603  
 Current Use: Cultivated Field  
 Zoned: I-100

**PR**

**and**

**AVERASB**

**DRAWN**

**CITY OF DUNN**  
Zoning Compliance Form

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).

**Property Identification Information:**

**TO BE COMPLETED BY THE PROPERTY OWNER**

Applicant Name: Dale Sparks

Applicant Contact Telephone Number: ( 919 ) 934 - 916

Property Address: 685 Bud Hawkins Road  
(Please include City, State, Zip Code) Dunn, Nc 28334

County PIN: 1515 - 68 - 9178

Subdivision \_\_\_\_\_

Phase \_\_\_\_\_

Lot # \_\_\_\_\_

Property Owner Name: Precision Siding And Windows

Property Owner Address: 490 E. Cornelius Harnett Blvd  
(Please include City, State, Zip Code) Lillington, Nc 27546

**Dimensions of Property:**

Width: \_\_\_\_\_ Depth: \_\_\_\_\_  
Square Feet: \_\_\_\_\_ Acreage: 7.58

Property Owner Contact Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Current Use of the Property:**

Residential

Commercial

Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

Office

Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

Other

Name of Business: Vacant  
# of Square Feet: \_\_\_\_\_

**Proposed Use of the Property**

Residential

Commercial

Name of Business: \_\_\_\_\_  
# of Square Feet: \_\_\_\_\_

Office

Name of Business: \_\_\_\_\_

# of Square Feet: \_\_\_\_\_

Other: Industrial

Name of Business: Precision Siding  
# of Square Feet: \_\_\_\_\_

**CITY OF DUNN**  
Zoning Compliance Form

**Existing Building(s):**

- Vacant Land
- Building One**  
Width: \_\_\_\_\_  
Depth: \_\_\_\_\_  
Current Use: \_\_\_\_\_
- Building Two**  
Width: \_\_\_\_\_  
Depth: \_\_\_\_\_  
Current Use: \_\_\_\_\_
- Building Three**  
Width: \_\_\_\_\_  
Depth: \_\_\_\_\_  
Current Use: \_\_\_\_\_

**Proposed Project:**

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

**Connection to Utilities:**

- Electricity
  - Public Water  Private Well
  - Public Sewer  Private Septic System
  - Storm Water System
  - Natural Gas
- Square feet of new construction \_\_\_\_\_

**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: \_\_\_\_\_

**Parking Spaces**

Number spaces provided \_\_\_\_\_

**TO BE COMPLETED BY THE ZONING OFFICIAL**

**Zoning Classification** IT-100

- 00,000 Required Lot Size
- \_\_\_\_\_ Required Front Yard Set Back
- \_\_\_\_\_ Required Rear Yard Set Back
- \_\_\_\_\_ 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.

**Parking Spaces:**

Required \_\_\_\_\_  
 Provided \_\_\_\_\_

**Special Conditions:**

septic approval only

Approved  Denied \_\_\_\_\_

Reason: \_\_\_\_\_

Signature: J. Williams

Date: 11-5-15

Amount: \$

Receipt Number: 11

Zoning Administrator