ritial Application Date: 🗗 " 🧖 👣	on Date: 8-2-17
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Application # 175004198	-(
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CU# ___

COUNTY OF HARNET NTIAL LAND USE APPLICATION

Central Permitting

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

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

LANDOWNER: Joseph S. 2	Mailing Ad	dress: 3833 Fulty 2n:120	
Dity: Forgetheritle	State; <u>NC</u> Zip; <u>283/2_</u> Contact No: <u></u>	910-635-6226 Email: Jainealmasigns	<u> 16 - 6</u> 01
PPLICANT*:	Mailing Address:		
ity:	_ State: Zip: Contact No:	Email:	
lease fill out applicant information if different	nan landowner		
INTACT NAME APPLYING IN OFFICE	Tateph S. Dain	Phone # 110 - 435 - 4224	
ROPERTY LOCATION: Subdivision:		Lot #: Lot Size: 6	96 ac
		Map Book & Page 🚵 🕽 🧸	
arcel: DU ISOU DO	103 D1 PIN: 0	596-97-4735.000	
		3501/ 423 Power Company": Dake Free	
		nber from Progress Energ	
•			
ROPOSED USE:		M	enelithic
		💋 Garage: 🗹 Deck: 🖊 Crawl Space: 🗹 Slab: Sla	ab:
(Is the bond	us room finished? (🔟) yes () no_w/ a clo	oset? () yes (🚅) no (if yes add in with # bedrooms)	
Atod: /Ciro v \# Redroot	ne # Baths Basement (w/wo hath)	Garage: Site Built Deck: On Frame Off F	-rame
	and floor finished? () yes () no Any o		
,	, , <u>,</u> ,,		
Manufactured Home:SWD	WTW (Sizex) # Bedroor	ns: Garage:(site built?) Deck:(site built?)
Duntou (Cina y Alia Bu	ildings: No. Bedrooms Per	Hoite	
Home Occupation: # Rooms:	Use: Hou	urs of Operation:#Employees:	
Addition/Accessory/Other: (Size	x \Use	Closets in addition? () yes	s () n
Addition Accessor from the Total	, 0.00		
ater Supply: County Ex	sting WellNew Well (# of dwellings:	using well) *Must have operable water before fi	inal
ewage Supply:New Septic Tank	(Complete Checklist) Existing Septi	c Tank (Complete Checklist) County Sewer	
oes owner of this tract of land, own land	I that contains a manufactured home within f	ive hundred feet (500') of tract listed above? () yes _(no
oes the property contain any easement	s whether underground or overhead (🚄) yes	s () no	
		ctured Homes: Other (specify):	
name (example of properties).			
equired Residential Property Line S	etbacks: Comments: <u>Front</u>	of the house to the back code o	<u>{</u>
ront Minimum 35 Actual	the pord is	165'.	
Rear	/88		
losest Side	<u>/04'</u>		
idestreet/corner lot			
Nearest Building			

en Mach			THE PARTY OF THE P	44.77 477	ed. Inspory i	s whites.	1:3 24:45
·· ·				<u></u>			
		; <u></u>					
· · ·							
	n to co-4/2 to c	all ordinances and law	s of the State of	North Carolina	regulating such work a	nd the enecificat	ione of plane

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

Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is falsified, changed, or the site is altered, then the Well Construction Permit shall become invalid.

3833 Rusty Roil Rd, Fayetteville NC 28312
Street Address, City, State, Zip Code

1. existing and/or proposed property lines and easements with dimensions;

The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show:

Applicant/Owner

APPLICANT INFORMATION

(910) <u>435 - 4224</u> Phone Number

2. the location of the facility and appurtenance; 3. the location for the proposed well;	
4. the location of existing or proposed sewer lines and/or sewage disposal systems 5, the location of any existing wells within 100 feet of the property; surface water	
6, above ground and/or underground storage tanks;	
7. and any other known sources of contamination within 100 fect of the proposed	well site.
The Applicant shall notify the Harnett County Health Director through or b Division of Environmental Health if any of the following occur prior to well of 1, there is a relocation of the proposed facility; 2, there is a change in the intended use of the facility; 3, there is a need for installing the waste water system in an area other than indica 4, there are landscape changed that affect site drainage. Contact information: Environmental Health Division - 91	ted on the well permit; or
Contact information. Environmental freatth Division - 21	10-023-7547
PROPERTY INFORMATION	<u>DN</u>
Proposed use of well	
Single-Family Multifamily Church Restaurant	Business Irrigation
Street Address <u>waren Rol</u> Subdivision	/Lot #
Parcel # 00 1500 0043 (1) PIN# 05	96-97-4735-000
Directions to the Site	
I have thoroughly read and completed this Application and certify that the informatio correct to the best of my knowledge and is give in good faith. Representatives of the H state officials are granted right of entry to conduct necessary inspections to determine	arnett County Health Department and
I understand that I am solely responsible for the proper identification and labeling of all promaking the site occessible so that a will can be properly constructed according to the permi	
//c	8-2-19
Property Owner's of Owner's Legal Representative Signature Required	



Town of Erwin Zoning Application & Permit

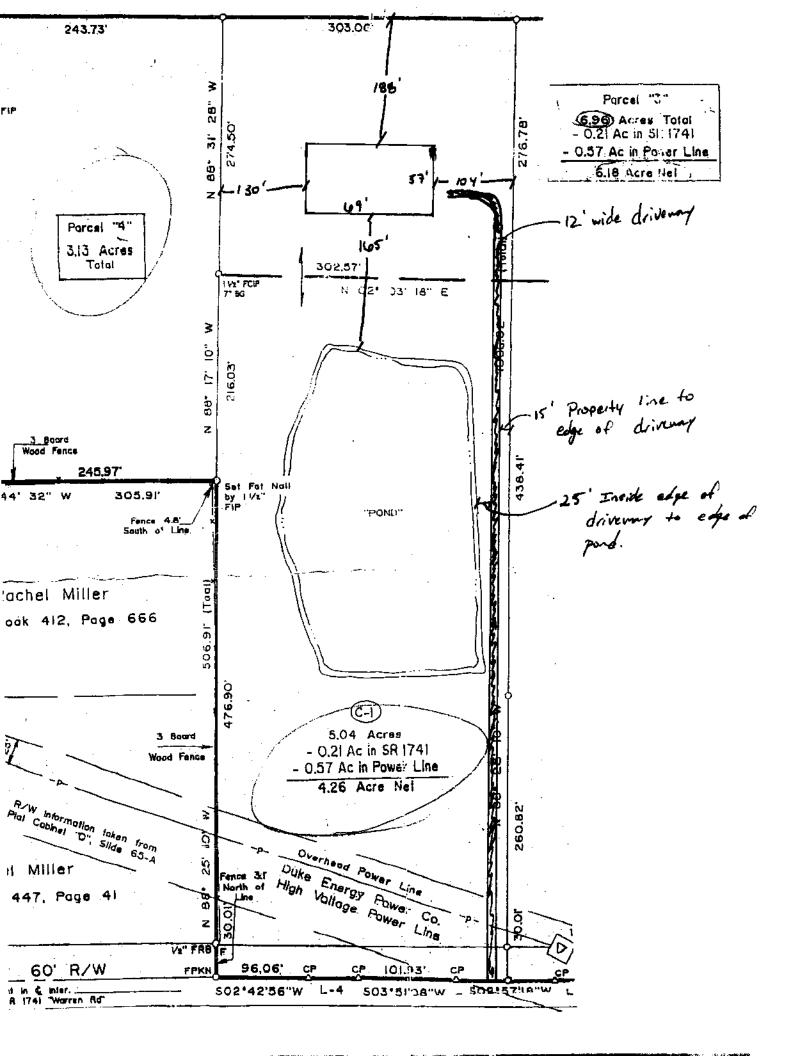
Permit #

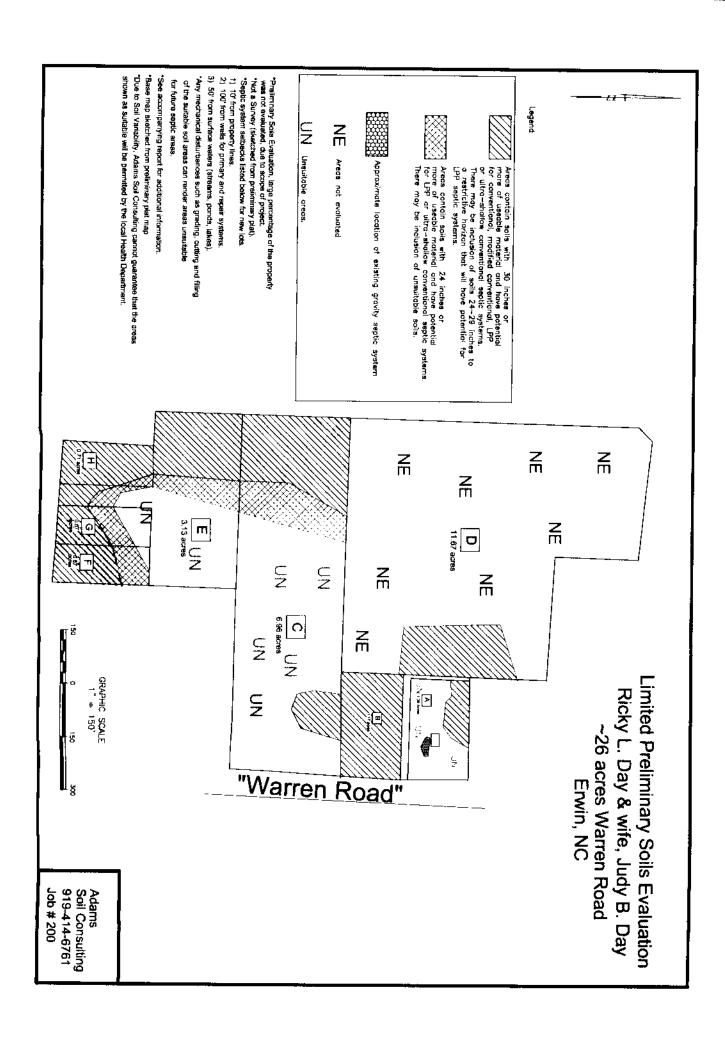
Planning & Inspections Department

Rev Sep 2014

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.

umpensions.				- <u>-</u>	· 	
Name of Applicant J	poeph Si &		Property Owner	Topph + wi	truy Bris	
Home Address Warren Rd						
City, State, Zip		NC, 28312	City, State, Zip	ENIN NE		
Telephone q	0-635-622		Telephone	910-635-622		
Email 7	Bain @ alpha &	gnanc.com	Email	Tania Calping	i i	
Address of Proposed Pro	operty	lowren Rd. E.	sin, NC			
Parcel Identification Nu			' I -	ated Project Cost		
What is the applicant rec	questing to bu		ye family dell	iy.		
the proposed use of the	subject proper	ty? Be specific.	ed frame conti	uello n.		
Description of any propose	ed improvement	ts				
to the building or property				<u> </u>		
What was the Previous I			<u>land</u>			
Does the Property Acces			445			
Number of dwelling/stru	uctures on the	property already	Prop	erty/Parcel size	6.94 acres - 6.	
		atershed Yes 🗸		Yes / No		
MUST circle one that appli	ies to property			Or		
		Existing/Proposed	County/City Sewe	er P		
Owner/Applicant Must Read and Sign The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and metorgoing 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 revacable of this						
application. Upon issuance	of this permit, t	he undersigning party	agrees to conform to	all applicable town	ordinances, zoning	
regulations, and the laws of						
The undersigning party authorizes the Town of Erwin to review this request and conduct a sign of province to this application as approved.						
Joseph Brin		Ah .c		8-2	12 PM	
Print Name		Signature of Owner o	r Representative	Date		
For Office Use		<u></u>		· · · · · · · · · · · · · · · · · · ·	 -	
Zoning District)-10 E	xisting Nonconformin		Nore		
Front Yard Setback	· · · ·	Other Permits Require			ire Marshal XOther	
L		tequires Town Zonin		_Foundation XP	rior to C. of O.	
		Zoning Permit Status	Approved			
Rear Yard Setback 3	5' F	fee Paid: 別の。	Date Paid: 8	Staff Initials:	ر مالا	
Comments Zonis Velification in gents order to do a per test						
Signature of Town Represe	entative:	um Boude	n Date	App oved/Denied;	8/2/17	





	<u>.</u>	_		
NAME:	Joseph	<u> </u>		APPLICATION #:
		This application to b	se filled out when anniving	for a septic system inspection.
<u>Cour</u>	<u>ity Health</u> i	Debartment Applic:	Ation for Improvemen	t Downit and land to the selection of th
** ****	TOTAL STREET	IN THIS AFFLICATION I	IN HALKIBIDI CHIANICHIA C	B THE CITE IC AT MEMBER OF THE PARTY OF THE
, manage (W VOLLKWIST	WITON TO CONSTRUCT	SHALL BECOME INVALID e site plan = 60 months; Compl	The parent in valid for the control of the control
,	010-893-752	5 option 1	e site pian = oo monins; Compi	etc plat = without expiration) CONFIDMATION #
<u>Envi</u>	ronmental F	leaith New Septic Sy	stemCode 800	CONFIRMATION #
• £	All property	irons must be made	visible. Place "pink pro	perty flags" on each corner iron of lot. All property
	mos musi be	CICALLY HAUGED ADDIOX	umateriy every 50 teet bar	WEER COMERC
• r	nace orange out buildings	e nouse corner flags" a	at each corner of the prop	osed structure. Also flag driveways, garages, decks,
• F	lace orange	Environmental Health	card in location that is ea	developed at/for Central Permitting. sily viewed from road to assist in locating property.
▼ 1,	property is	mickry wadaea, Enviro	onmental Health requires t	that you clean out the undergrowth to allow the soil
-	varuation to	oe penonnea, Inspect	iors snould be able to wal	K treety around site. Do not grade property
• 4	<u>ui ious lo de</u>	' aaaressea within 10	l Dusiness davs after co	nfirmation \$25.00 return trin for may be incorred
• A	ifter preparin	o proposed site call the	ark nouse corners and I	property lines, etc. once lot confirmed ready. at 910-893-7525 option 1 to schedule and use code
8	00 (after sel	ecting notification pern	nit if multiple permits exis	at 910-693-7525 option 1 to schedule and use code at) for Environmental Health inspection. Please note
<u> </u>	<u>onininanon i</u>	<u>umber given at end</u> of	recording for proof of rea	luest.
• L	lse Click2Go	v or IVR to verify resul	ts. Once approved, proce	eed to Central Permitting for permits.
<u>Envil</u>	<u>ronmentai H</u>	eaith Existing Tank li	nspections Code 800	
• P	repare for in	instructions for placing	flags and card on proper	ty. tank as diagram indicates, and lift lid straight up (<i>if</i>
ρ	ossible) and	men put na pack in p	ilace. (Unless inspection i	s for a septic tank in a mobile home park)
• 1	O NO! TEWA	E LIDS OFF OF SEPTIC	TANK	•
• A	iter uncoveri	ng outlet end call the	voice permitting system a	at 910-893-7525 option 1 & select notification permit
u Oi	mulliple per iven at end o	frecording for proof of	800 for Environmental H	ealth inspection. Please note confirmation number
• Ū	se Click2Go	v or IVR to hear results	s. Once approved, procee	d to Central Permitting for remaining permits.
36L TIC				
		ion to construct please ind	licate desired system type(s);	can be ranked in order of preference, must choose one.
{}} Acc	epted	{}} Innovative	{}} Conventional	{ ∠ } Any
{}} Alte	rnative	{}} Other	<u> </u>	
The applica	ant shall notify	y the local health departn		innlication if any of the following apply to the property in
}YES	I⊿ NO	Does the site contain a	ny Jurisdictional Wetlands?	
{YES	(<u>✓</u>) NO	Do you plan to have ar	n <u>irrigation system</u> now or in	the future?
}YES	{ } NO	Does or will the buildi	ng contain any <u>drains?</u> Pleas	se explain
}YES	11 NO			Wastewater Systems on this property?
}YES	(🗹 NO	ls any wastewater goin	ig to be generated on the site	other than domestic sewage?
}YES	{ ∠ } NO	Is the site subject to ap	proval by any other Public A	Agency?
∠ YES	{}} NO	Are there any Easemen	nts or Right of Ways on this	property?
∠ YES	{}} NO	Does the site contain an	ny existing water, cable, pho	one or underground electric lines?
		If yes please call No C	Cuts at 800-632-4949 to loca	te the lines. This is a free service.
Have Read	This Applicat	ion And Costifu That The		

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)

8-2-17 DATE