

Initial Application Date: 8-5-11

**Farm
Exempt
COMMERCIAL**

Application # 1150027290

DRB # _____

CU # _____

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting

108 E. Front Street, Lillington, NC, 27546

Phone: (910) 893-7525

Fax: (910) 893-2793

www.harnett.org/permits

LANDOWNER: Bobby Larry Baker

Mailing Address: 5324 Hodges Rd.

City: Fuquay-Varina

State: NC

Zip: 27526

Contact # 919-868-7266

Email: lbaker@qualityequip.com

APPLICANT*: _____

Mailing Address: _____

City: _____

State: _____

Zip: _____

Contact # _____

Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Bobby Larry Baker

Phone # 919-868-7266

PROPERTY LOCATION: Subdivision: _____

Lot #: _____

Lot Size: _____

State Road # 1407

State Road Name: Wade Stephenson

Map Book&Page 2004/131

Parcel: 050635 0069 02

PIN: 0635-15-9468.000

Zoning: R3D

Flood Zone: No

Watershed: No

Deed Book&Page: RE2033,692-694

Power Company*: Progress Energy

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

from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head North on Hwy. 401 toward

Fuquay-Varina - Go approx. 3.5 miles - Turn left on Christian Light Rd
Go 4-5 miles & turn left on Cokesbury Rd. - Go 5 miles
& turn left on Wade Stephenson Rd - Property is approx
1/4 mile on right

PROPOSED USE:

- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Business Sq. Ft. Retail Space: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____
- Accessory/Addition/Other (Size 42 x 100) Use: Farm Bldg. / storage w/ Bathroom

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

Comments: _____

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.

Bobby Larry Baker
Signature of Owner or Owner's Agent

8-5-11
Date

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

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

LANDOWNER: Bobby Larry Baker
MAILING ADDRESS: 15324 Hodges Road
CITY: Fuquay-Varina STATE: N.C. ZIP: 27526 PHONE: 919-868-7266

APPLICATION DATE: 8-5-11 APPLICATION # _____

APPLICANT: Bobby Larry Baker
MAILING ADDRESS: 15324 Hodges Road
CITY: Fuquay-Varina STATE: N.C. ZIP: 27526 PHONE: 919-868-7266

PROPERTY LOCATION: SR# 1407 SR NAME: Wade Stephenson Rd
PARCEL # 05 0635 0009 02 PIN # 0035-15-9468-000
ACREAGE: 11-14 FARM NUMBER: _____

VERIFICATION OF LAND USE PROGRAM BY TAX OFFICE: _____
SIGNATURE / CENTRAL PERMITTING TECHNICIAN [Signature] DATE 8-5-11

I (we) have read and understand the requirements to qualify for a farm exemption. I (we) hereby claim such exemption because I (we) operate a bona fide farm which has a valid farm serial number and is currently enrolled in Harnett County's Land Use Program. Within the Land Use Program I (we) participate in:
Agriculture (); Horticulture (); Forestry ()
NOTE: Check each category that applies.

AFFIRMATION: I (we) the undersigned declare under penalties of law that the information contained in this application has been examined by me (us) and to the best of my (our) knowledge and belief is (are) true and correct. Additionally, I (we) fully understand that falsification of information supplied by me (us) herein shall cause any permit issued relying on such information, to be automatically revoked and all work shall immediately cease.

Signature(s) of Owner(s): Bobby Larry Baker Date: 8-5-11

Date: _____

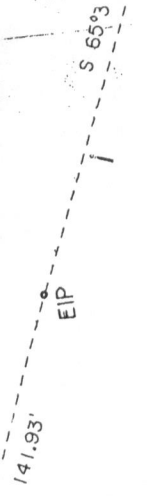
FOR OFFICE USE ONLY

APPROVED BY: [Signature] DATE: 8-5-11 PERMIT# 1150027290

DENIED BY: _____ DATE: _____

REASON FOR DENIAL: _____

S.K. 140
 WADE STEPHENSON ROAD
 60' PUBLIC R/W



Farm Exempt
 SITE PLAN APPROVAL
 DISTRICT RA 30 USE Farm Bldg.

#BEDROOMS
 8-5-11

[Signature]
 Zoning Administrator

S 78°10'29"E

N 02°50'20"E
 707
 96.59'
 N 03°59'42"E
 46.76'
 616
 615

N 06°30'56"E 96.86'
 N 08°43'36"E 46.96'
 614
 613
 N 09°31'18"E 97.40'
 151ps

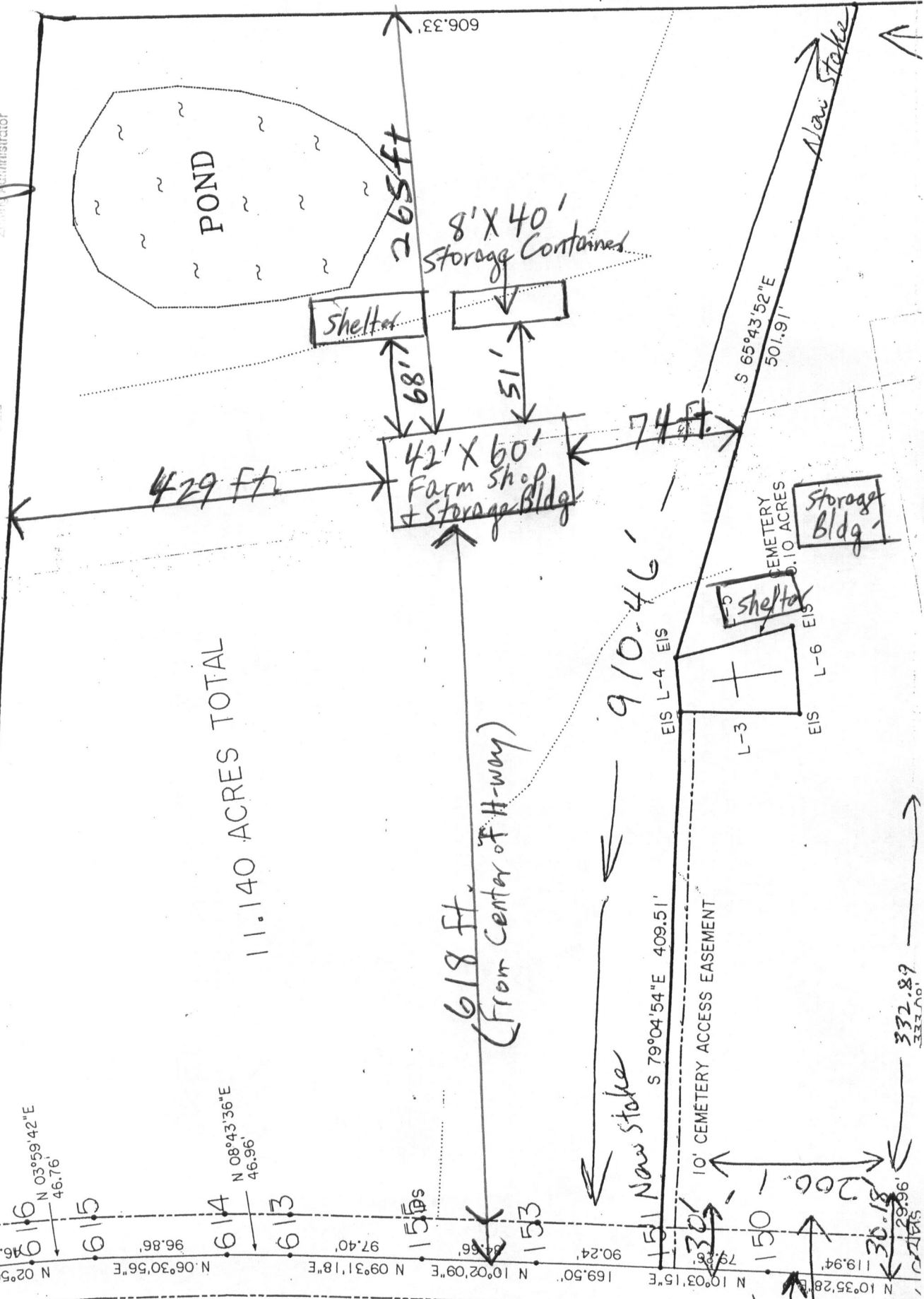
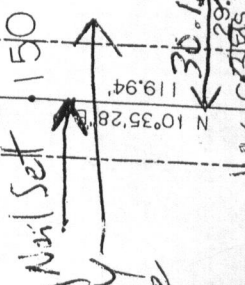
N 10°02'09"E 169.50'
 N 10°03'15"E 79.26'
 151 New Stake
 S 79°04'54"E 409.51'
 30'
 150
 N 10°35'28"E 119.94'
 30.18'
 20.96'
 333.00'

11.140 ACRES TOTAL

618 ft.
 (From Center of H-way)

910-46'

10' CEMETERY ACCESS EASEMENT



S 08°45'27"W 1048.84'

S 65°43'52"E
 501.91'

CEMETERY
 0.10 ACRES

EIS L-4
 EIS L-6

Nov Set

NAME: Bobby Larry Baker

APPLICATION #: 1150027290

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 # 118305

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.

Bobby Larry Baker
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8-5-11
DATE