Initial Application Date: <u>U-3-08</u> Applic	
Country OF HARNETT RESIDENTIAL LAND USE Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525	Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER: House E. Trace Small Mailing Address: 3	526 MACCUMBER COULT
City - Author 16 State 1 Zip: 283/ Home #	Contact #: 916-578-2489
APPLICANT: PAIN HACON HOKES Mailing Address: 5	429 Partterille
City: Rale: NC zip: 27603 Home #:	Contact #: 919-1067-9999 ANDON 919-1067-9999 OFFICE
CONTACT NAME APPLYING IN OFFICE: Julia Hollwell	Phone #: 919-394-0260 cell
PROPERTY LOCATION: Subdivision: E V Walker	Lot #:Lot Acreage:
State Road #: 2039 State Road Name: WATTLEY Road	Map Book&Page: 6/S
Parcel: 120555 6035 PIN: 0.555-3	36-8986.000
Zoning: NOLL Flood Zone: NOLL Watershed: NA Deed Book&Page: 24	99,477 Power Company Cocces Energy
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: RST ON U	15-401 RS+ ON
m=neill Hobbs Road left on wire	Rd (Z'9 m) to WAller
Rd. (turk right)	
Mod (Size 1) x 53	Deck Crawl Space / Slab  isarage Deck Crawl Space / Slab  isarage State Built Deck S ON Frame / OFF  urage (site built? Deck (site built?)  of Operation: #Employees ()no
*Homes with Progress Energy as service provider need to supply premise number from Progress I	Energy
Water Supply: County ( ) Well (No. dwellings MUST have operable was Sewage Supply: New Septic Tank (Complete New Tank Checklist) ( ) Existing Septic Property owner of this tract of land own land that contains a manufactured home w/in five hundred Structures (existing or proposed): Single family dwellings Manufactured Homes	c Tank () County Sewer
Required Residential Property Line Setbacks: Comments: 1000	ANC CAMESTIC
Front Minimum 35 Actual 33 Extended	29 x 52'8"
Rear 25/ 25/ 3054,	لولالرلو
Closest Side 10' 1.20	- d + 011-011 c la 1-11 MC
Sidestreet/comer lot 20/	1001 + 24x24 Site bit Gu
Nearest Building on same lot	8X8 GECK + 8X8SCHPrch
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. Pe	
Ito Obnille O	15/200
Signature of Owner or Owner's Agent Date	1-1-X

\*\*This application expires 6 months from the initial date if no permits have been issued\*\*

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION
Please use Blue or Black Ink ONLY

name: SM		U	

APPLICATION #:_	08500	20228

NAME:	<i>&gt;W</i>	4		APPLICATIO	ON #:(	00000	XUddX
1	, , , , , , , , , , , , , , , , , , ,	*This application to be fi	lled out when anniv	ing for a sentic system	n insnecti	ion.*	•
IF THE INFO PERMIT OR depending up  Enviro Pia ev Pla ga	y Health Donation IN. AUTHORIZA con documentate nmental Healace "pink property 50 feet bace "orange rages, decks	epartment Application to be in epartment Application IS F. THIS APPLICATION IS F. TION TO CONSTRUCT SHIP ion submitted. (complete site of the submitted) (complete site of the submitted) on each continued to etween corners. The submitted is a submitted of the submitted in the su	ALSIFIED, CHANGEI ALL BECOME INVA plan = 60 months; cor Test Code 8 priner iron of lot. A each corner of the ng pools, etc. Place	O, OR THE SITE IS ALT LID. The permit is valid applete plat = without expi  All preperty lines must be ructure site. Use a ge flags per site plan of	r Autho ERED, TH for either oration)  St be cle additional	rization to Community of the Name of the N	VEMENT but expiration pproximately e driveways,
		nickly wooded, Environn					
		e performed. Inspectors <u>locate utili</u> ty lines prior					
• Aft no <b>gi</b> v	ter preparing tification peri ven at end o	proposed site call the value of	voice permitting sys or Environmental H of request.	stem at 910-893-752 ealth confirmation. <u>I</u>	5 and us Please n	e code <b>800</b> (af note confirmat	ter selecting
		or IVR to hear results.			mitting fo	or permits.	
		<u>llth Existing Tank Inspec</u> nental Health "orange" (		300 t is assily viewed fro	on read	Fallow obeyo	innterrations
		s on property	card in location tha	t is easily viewed it	m road.	rollow above	instructions
• Pre	epare for in	spection by removing		diagram indicates.	Loosen	trap door co	ver. (Unless
	•	r a septic tank in a mobi	, ,				
• Aπ	er preparing rmits then u	trapdoor call the voice se code <b>800</b> for Envirol	permitting system pental Health cor	at 910-893-7525 & firmation <b>Please no</b>	select na te confi	otification perm	nit if multiple
		ng for proof of reques		inimation. <u>I rease ne</u>	re com	ininacion numi	ver Alaen at
• Us	e Click2Gov	or IVR to hear results.	Once approved, pro	ceed to Central Perr	nitting fo	r remaining per	rmits.
SEPTIC				<i>e</i>			
If applying	for authorization	on to construct please indica	ite desired system type	e(s): can be ranked in or	der of pre	ference, must cho	oose one.
Acce		{ } Innovative	{ } Conventional	·	•		
·—·	native	{ } Other					. :
	1	the local bealth departmen	nt upon submittal of t	his application if any o	f the follo	owing apply to th	ne property in
question. If	the answer is	"yes", applicant must atta	ch supporting docum	entation.		0	
{}}YES	(_) NO	Does the site contain any					2.
{}}YES	{_}} NO\	Do you plan to have an in	rigation system now	or in the future?			
{}}YES	{_}} NO \	Does or will the building	contain any drains?	Please explain.			
{}}YES	{}} NO /	Are there any existing we	ells, springs, waterlin	es or Wastewater Syste	ems on th	is property?	
{}}YES	{_}} N9	Is any wastewater going	to be generated on th	e site other than domes	tic sewag	e?	·
{}}YES	OK{_}}	Is the site subject to appr	oval by any other Pul	olic Agency?			
{}}YES	{	Are there any easements	or Right of Ways on	this property?			
{_}}YES	Z) NO	Does the site contain any	-	• • •	d electric	lines?	

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

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

The Site Accessible So That A Complete Site Evaluation Can Be Performed.

	. 1	$I \cap A$			1
OWNER NAME:	ma	S. L. K	mul -	APPLICATION #:	-D

## \*This application to be filled out only when applying for a new septic system.\* <u>County Health Department Application for Improvement Permit and/or Authorization to Construct</u>

IM 60	THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE PROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without praction)
DE	VELOPMENT INFORMATION
7	New single family residence
<u> </u>	Expansion of existing system
0	Repair to malfunctioning sewage disposal system
	Non-residential type of structure
WA	ATER SUPPLY
1	New well
	Existing well
	Community well
<b>.</b>	Public water
	Spring
Are	there any existing wells, springs, or existing waterlines on this property?
{_	} yes {} no {} unknown
-	<u>PTIC</u>
Ifa	applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{	Accepted [_] Innovative
{_	Alternative {_} Other
{	Conventional Any
The que	applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in stion. If the answer is "yes", applicant must attach supporting documentation.
{_	YES { NO Does the site contain any Jurisdictional Wetlands?
{	YES { NO Does the site contain any existing Wastewater Systems?
{	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?
{ <b>∠</b>	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.
	ave Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
	e Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
	nderstand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
1116	Site Accessible So That A Complete Site Evaluation Can Be Performed.
_	100 LINU 0 0/3/200X
PR	OPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE

Malker