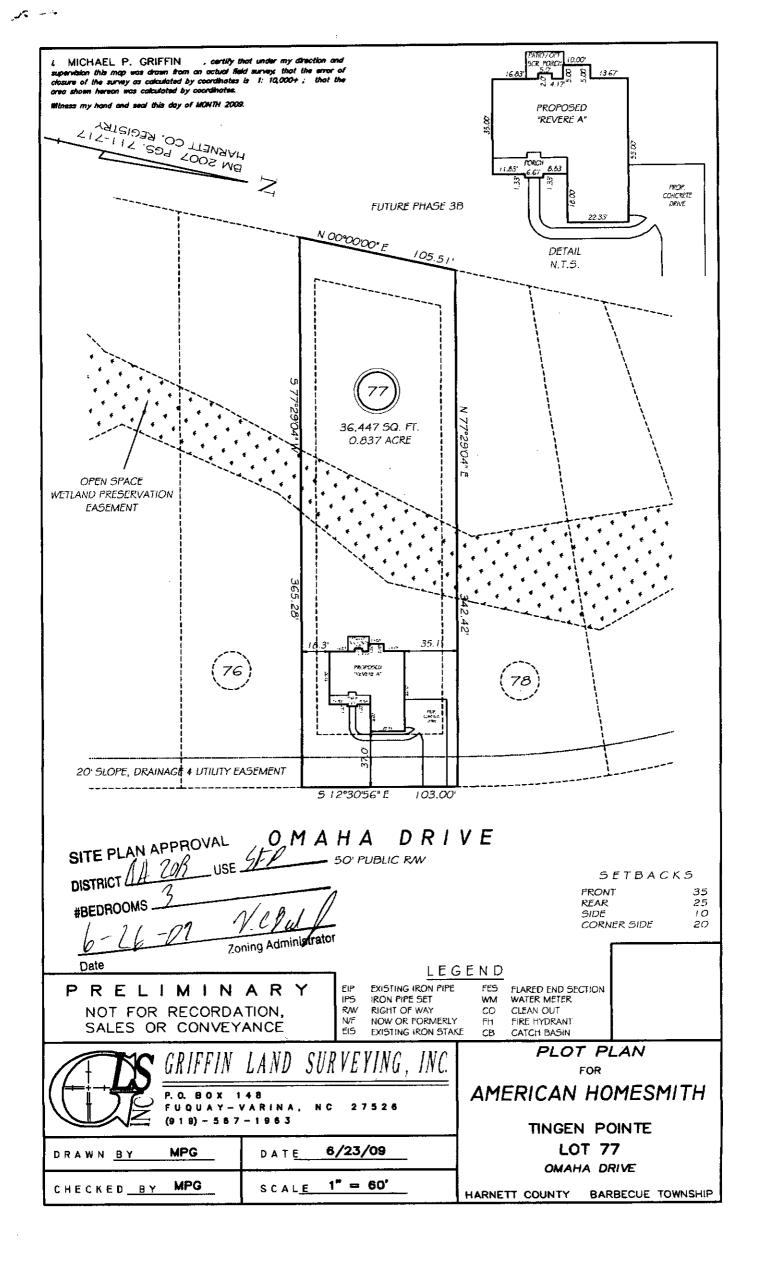
Initial Application Date: 6-26-29 77  Application # 09 500 22 363  CU#
CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.narnett.org/permits
LANDOWNER: HARNETT LAND GROVP Mailing Address: PO BUY 591
$29 \text{ A.s. } = 77662 \text{ However} \qquad \qquad \text{Conject $f$} = \{1, 1, 29, 3, 9, 12, 12, 12, 12, 12, 12, 12, 12, 12, 12$
Almatical CAN How FCM 17+ Malling Address: TO BOX 1/365
City: FALF161+ State: NC Zip: C/DC4 Home #: Contact #: 719 (300 0 100
Phone #: 919 600 09100
PROPERTY LOCATION: Subdivision w/phase or section: TNGTN POINTS Lot #: 77 Lot Acreage: 837
Man Dooks Dogg: (OO )
State Road #: State Hoad Name: 9597-3644 - 000
State Road #:State Road Name:
Zoning A-202 Flood Zone: Watershed: W/4 Deed Book&Page: UCS (100 T) Power Company
from Progress Energy.
*New homes with Progress Energy as service provider need to supply premise number 17 00 . 12 M 1 VG 5 .  SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TWY 77 00 . 12 M 1 VG 5 .
TURN (C) ON OMAHA DR
PROPOSED USE:  SFD (Size 9 x 53) # Bedrooms  # Baths  Basement (w/wo bath)  Garage  Deck  Crawl Space / Slab  (Is the bonus room finished?  w/ a closet  if so add in with # bedrooms)  Mod (Size x ) # Bedrooms  # Baths Basement (w/wo bath)  Garage  Site Built Deck  ON Frame / OFF  (Is the second floor finished?  Any other site built additions? )  Manufactured Home: SW DW TW (Size x ) # Bedrooms  Garage  (site built? ) Deck (site built? )  Duplex (Size x ) No. Buildings No. Bedrooms/Unit
Hours of Operation: #Employees
Home Occupation # Hooms Use Closets in addition(_)yes (_)no
Water Supply: County Well (No. dwellings) MUST have operable water before final  Sewage Supply: New Septic Tank (Complete Checklist)
THEIR BLY SLATE THAT FOLIAGE ACCURATE A
6/24/07
Signature of Owner or Owner's Agent Date

"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



AME: AMERICAY HOMESMITH	APPLICATION #:
Aug to the Man to be filled out when ar	onlying for a septic system inspection.*
	ramont pormit singuit allumit kalium tu cumur ev
FTHE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHAN ERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME IN epending upon documentation submitted. (complete site plan = 60 months 910-893-7525 option 1  Environmental Health New Septic System Code 800  Place "pink property flags" on each corner iron of lo	AVALID. The permit is valid for either 60 months or without expiration (complete plat = without expiration)  CONFIRMATION #  All property lines must be clearly flagged approximately
<ul> <li>Place "orange house corner flags" at each corner of the out buildings, swimming pools, etc. Place flags per sit.</li> <li>Place orange Environmental Health card in location the lift property is thickly wooded, Environmental Health revaluation to be performed. Inspectors should be ableated to be performed. Inspectors should be ableated to be a considered to be performed. Inspectors should be ableated to be a considered to be permitting to be a considered to be permitting to be a considered to be a conside</li></ul>	equires that you clean out the undergrowth to allow the soil e to walk freely around site. <i>Do not grade property.</i> Inspection. 800-632-4949 (This is a free service)  Inspection system at 910-893-7525 option 1 to schedule and use code nits exist) for Environmental Health inspection. Please note reproof of request.  The proceed to Central Permitting for permits.  The solution of the property.  The solution is a size of the solution of the sol
Garage designation of the control of	
_	n type(s): can be ranked in order of preference, must choose one.
SEPTIC If applying for authorization to construct please indicate desired system	m type(s): can be ranked in order of preference, must choose one.  tional {}} Any .
SEPTIC  If applying for authorization to construct please indicate desired system  [] Accepted  [] Conven  [] Alternative  [] Other	ntional () Any ·
SEPTIC  If applying for authorization to construct please indicate desired system  [] Accepted	ational () Any .  al of this application if any of the following apply to the property in
If applying for authorization to construct please indicate desired system  [] Accepted	ational [] Any  tal of this application if any of the following apply to the property in documentation.  Wetlands?
SEPTIC  If applying for authorization to construct please indicate desired system  [] Accepted  [] Other  [] Other  The applicant shall notify the local health department upon submitt question. If the answer is "yes", applicant must attach supporting desired to the site contain any Jurisdictional of the local health department upon submitt question. If the answer is "yes", applicant must attach supporting desired to the local health department upon submitt question. If the answer is "yes", applicant must attach supporting desired system.	ational [] Any  tal of this application if any of the following apply to the property in documentation.  Wetlands?

(	·— '	· ·	
{}}YES	NO	Does or will the building contain any drains? Please explain.	
(}YES	<b>€</b> LNO	Are there any existing wells, springs, waterlines or Wastewater Systems on this prope	rty?
{}YES	+≤tNO	Is any wastewater going to be generated on the site other than domestic sewage?	
{}YES	MNO	Is the site subject to approval by any other Public Agency?	
YES	{_}} NO	Are there any easements or Right of Ways on this property? UTLITY	
{_}}YES	₽≤LNO	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.	
State Office I Understa	ials Are Grante nd That I Am S	tion And Certify That The Information Provided Herein Is True, Complete And Correct. And Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Application Responsible For The Proper Identification And Labeling Of All Property Lines And Control Responsible For The Property Lines And C	icable Laws And Kules.
	21/	TOR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	6(Z4/09 DATE
	ı,		5/0