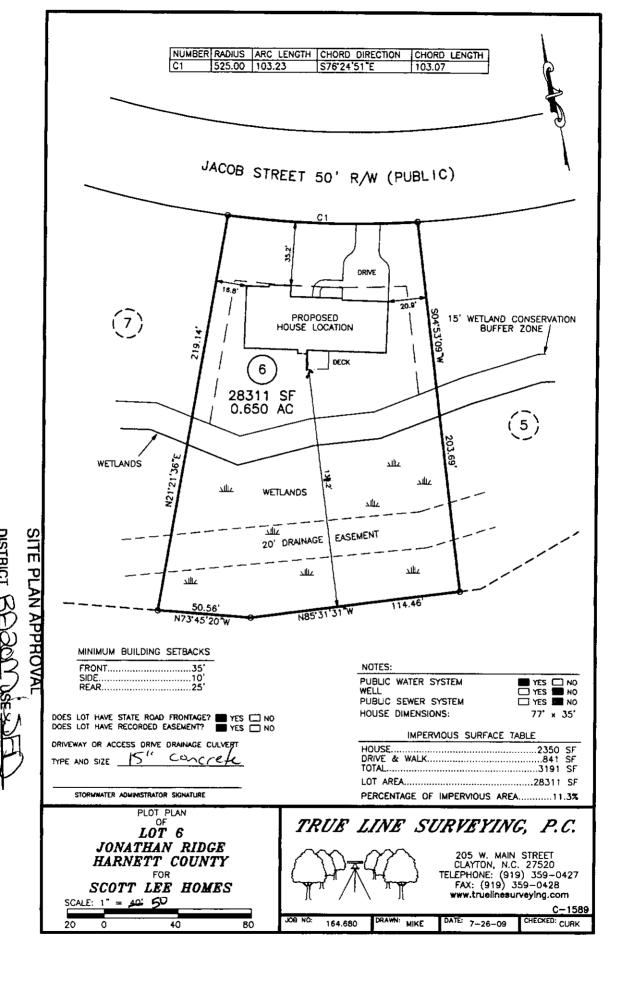
Initial Application Date:_	7	1/30	<u>(0</u>	9
_		7		—.

Application # 09500 22550
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COUNTY OF HARNETT LAND USE A Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-75	
LANDOWNER: Scott Lee Homes, Inc Mailing Address:	100 Butternut Lane
City: Clayton State: NC Zip: 27520 Home #: 919	5532085 Contact #: 9193691862
APPLICANT*: Same Mailing Address:	
City: State Zip: Home #: *Please fill out applicant information if different than landowner	Contact #:
PROPERTY LOCATION: State Road #452 State Road Name: Truelove	
Parcel: 050635010320 PIN: 106.3	5.38 0199.00
Zoning RA20M subdivision: Jonathan Ridge	<i>-</i>
Flood Plain: Y Panel: Watershed: NA Deed Book/Pag	ne 02261/0057 Plat Book/Page: 2006-166
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 twrds And	
Fuguay turn left onto Truelove right onto Adrian Street.	1 Da Da COD OHCOT
	· · · · · · · · · · · · · · · · · · ·
	- toolerdeet
PROPOSED USE:	Circle:
- ria	Garage Of Deck / Craw Space / Slab
SFD (Size / / x + ) # Bedrooms # Baths Basement (w/wo bath) Baths Basement (w/wo bath) Baths Bat	Garage (site built? ) Deck (site built? )
Ala Dadanama/Linit	
DAL DAL TALLOGO	— Garage (site built? ) Deck (site built? )
Tree	# Employees: Hours of Operation:
Business Sq. Ft. Retail SpaceI ype	# Employees: Hours of Operation:
☐ Industry Sq. Ft	Floure of Operation.
☐ Church Seating Capacity # Bathrooms Kitchen	House of Operation:
☐ Home Occupation (Sizex) # Rooms Use	
Accessory/Other (Sizex) Use	
Addition to Existing Building (Sizex) Use	Closets in addition()yes ()nd
Water Supply: () County () Well (No. dwellings) () Other	
Sewage Supply: () New Septic Tank (Must fill out New Tank Checklist) () Existing Se	ptic Tank () County Sewer () Other
Property owner of this tract of land own land that contains a manufactured home w/in five hu	ndred feet (500') of tract listed above? ()YES ()NO
Structures on this tract of land: Single family dwellings Manufactured Homes	Other (specify)
Required Residential Property Line Setbacks: Comments:	
130	
Rear	
Side	
Sidestreet/corner lot	
Nearest Building 10 on same lot	
if permits are granted I agree to conform to all ordinances and the laws of the State of t	North Carolina regulating such work and the specifications of pl
submitted I hereby state that the foregoing statements are accurate and correct to the t	pest of my knowledge. This permit is subject to revocation if it
information is provided on this form.	<b>-1</b> -
A 6 3	//20/00
Signature of Owner or Owner's Agent	Date

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



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APPLICATION #:	22556

\*This application to be filled out only when applying for a new septic system.\*

## 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)

New single family residence  Expansion of existing system  Repair to malfunctioning sewage disposal system  Non-residential type of structure  WATER SUPPLY  New well  Existing well  Community well  Spring  Are there any existing wells, springs, or existing waterlines on this property? {
Expansion of existing system Repair to malfunctioning sewage disposal system Non-residential type of structure  WATER SUPPLY Non-residential type of structure  Existing well Existing well Existing well Existing well Public water Spring Are there any existing wells, springs, or existing waterlines on this property? {_  } yes { \$\sqrt{\
Repair to malfunctioning sewage disposal system  Non-residential type of structure  WATER SUPPLY  New well  Existing well  Community well  Public water  Spring  Are there any existing wells, springs, or existing waterlines on this property? {_  yes (
Non-residential type of structure  WATER SUPPLY  New well  Existing well  Community well  Public water  Spring  Are there any existing wells, springs, or existing waterlines on this property? {_} yes {✓} no {_} unknown  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 {_} Alternative {_} Other {✓} Conventional {_} Any  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 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?  Il Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct.
WATER SUPPLY  New well  Existing well  Community well  Public water  Spring  Are there any existing wells, springs, or existing waterlines on this property? {_} yes {✓} no {_} unknown  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 {_} Alternative {_} Other {✓} Conventional {_} Any  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 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?  It Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct.
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Existing well Community well Public water Spring Are there any existing wells, springs, or existing waterlines on this property? {_} yes {
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Public water    Spring
Are there any existing wells, springs, or existing waterlines on this property? {_} yes { \( \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Are there any existing wells, springs, or existing waterlines on this property? {_} yes {\sum_i no {_}} unknown  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 {_} Alternative {_} Other {\sum_i } Conventional {_} Any  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 {\sum_i NO} Does The Site Contain Any Jurisdictional Wetlands?  {_} YES {\sum_i NO} Does The Site Contain Any Existing Wastewater Systems?  {_} YES {\sum_i NO} Is Any Wastewater Going To Be Generated On The Site Other Than Domestic Sewage?  {_} YES {\sum_i NO} 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?  I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct.
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Alternative   Other   Conventional   Any
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Authorized County and Come Comments and Electrical Comments and Electrical Comments and Comments
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)  DATE  DATE