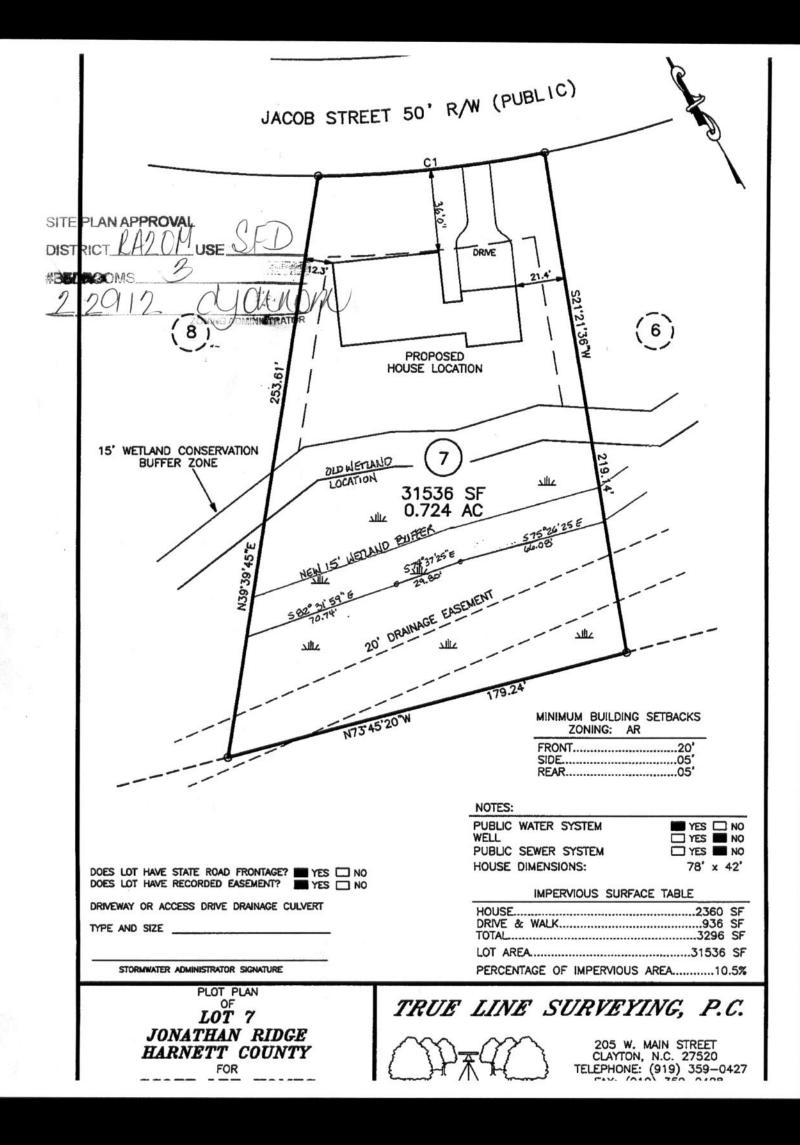
Initial Application Date: 7:30.09 2.20.12 Application # 09.5002255
COUNTY OF HARNETT LAND USE APPLICATION  Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org
LANDOWNER: Scott Lee Homes, Inc. Mailing Address: 100 Butternut Lane
City: Clayton
APPLICANT*: Same Mailing Address:
City: State: Zip: Home #: Contact #:
riease illi out applicant information if different than landowner
PROPERTY LOCATION: State Road #:452 State Road Name: Truelove
Parcel: 050635010333 PIN: 0635289265,000
ZoningRA20M Subdivision: Jonathan Ridge Lot #: Lot Size:
Flood Plain: Vatershed: Deed Book/Page: 02261/0057 Plat Book/Page: 2006-166
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 twrds Angeir left onto hwy 55 to hwy42, go thru
Fuguay turn left onto Truelove right onto Adrian Street. Lost an Jacob
SFD (Size .
Front Minimum 35 Actual 36
Rear 25
side : 10 12-3
Sidestreet/corner lot 20 21.4
Nearest Building 10 on same lot
If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of permits are granted I agree to conform to all ordinances are granted I agree to conform to all ordinances and the specific state of the specifi
submitted. I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. This permit is subject to revocation if
information is provided on this form
2-29-12
Signature of Owner or Owner's Agent Date

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



## \*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)

DE	VELO	MENT INF	ORMATION	
<b>X</b>	New single family residence			
☐ Expansion of existing system			ng system	
☐ Repair to malfunctioning			oning sewage disposal system	
☐ Non-residential type of			of structure	
			* *	
WA	TER S	UPPLY	_	
0	New w	ell	•	
☐ Existing well				
□ Community well				
X)	Public	water		
	Spring			
Are	there a	ny existing w	ells, springs, or existing waterlines on this property? {} yes {X_} no {} unknown	
	PTIC			
			ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
∠{¥} Accepted			{_}} Innovative	
Alternative  { X } Conventional			{}} Other	
11/2	C) Conv	entional	{}} Any	
			y the local health department upon submittal of this application if any of the following apply to the property is "yes", applicant must attach supporting documentation.	ir
{_	}YES	{x} NO	Does The Site Contain Any Jurisdictional Wetlands?	
_	}YES	X NO	Does The Site Contain Any Existing Wastewater Systems?	
{_	}YES	{X} NO	Is Any Wastewater Going To Be Generated On The Site Other Than Domestic Sewage?	
	}YES	{X} NO	Is The Site Subject To Approval By Any Other Public Agency?	
{_	}YES	{ <u>X</u> } №	Are There Any Easements Or Right Of Ways On This Property?	
T FI	ave Res	d This Appl	ication And Certify That The Information Provided Herein Is True, Complete And Correct.	
			d State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine	
		18T.C	icable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification	
			roperty Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can	î
	Perform		4 1	ě
(		110	2-29-12	
PR	OPERT	OWNER	S OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE	-