

Initial Application Date: 7-30-09 2-29-12

Application # 09-50022558 R

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org

COUNTY OF HARNETT LAND USE APPLICATION

LANDOWNER: Scott Lee Homes, Inc Mailing Address: 100 Butternut Lane

City: Clayton State: NC Zip: 27520 Home #: 9195532085 Contact #: 9193691862

APPLICANT: Same Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home #: \_\_\_\_\_ Contact #: \_\_\_\_\_  
\*Please fill out applicant information if different than landowner

PROPERTY LOCATION: State Road #: 1452 State Road Name: Truelove

Parcel: 050635 010325 PIN: 0635288441.000

Zoning: RA20M Subdivision: Jonathan Ridge Lot #: 9 Lot Size: .467

Flood Plain: Y Panel: \_\_\_\_\_ Watershed: na 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 Fuquay turn left onto Truelove right onto Adrian Street. Left on Jacob

PROPOSED USE:

- SFD (Size 7-8 x 28-1) # Bedrooms 3 # Baths 2.5 Basement (w/w/o bath) \_\_\_\_\_ Garage 592 Deck 126 Circle: Space / Slab
- Modular: On frame \_\_\_\_\_ Off frame (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Garage \_\_\_\_\_ (site built?) \_\_\_\_\_ Deck \_\_\_\_\_ (site built?) \_\_\_\_\_
- Multi-Family Dwelling No. Units \_\_\_\_\_ No. Bedrooms/Unit \_\_\_\_\_
- Manufactured Home: SW \_\_\_\_\_ DW \_\_\_\_\_ TW (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ Garage \_\_\_\_\_ (site built?) \_\_\_\_\_ Deck \_\_\_\_\_ (site built?) \_\_\_\_\_
- Business Sq. Ft. Retail Space \_\_\_\_\_ Type \_\_\_\_\_ # Employees: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_
- Industry Sq. Ft. \_\_\_\_\_ Type \_\_\_\_\_ # Employees: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_
- Church Seating Capacity \_\_\_\_\_ # Bathrooms \_\_\_\_\_ Kitchen \_\_\_\_\_
- Home Occupation (Size \_\_\_\_\_ x \_\_\_\_\_) # Rooms \_\_\_\_\_ Use \_\_\_\_\_ Hours of Operation: \_\_\_\_\_
- Accessory/Other (Size \_\_\_\_\_ x \_\_\_\_\_) Use \_\_\_\_\_
- Addition to Existing Building (Size \_\_\_\_\_ x \_\_\_\_\_) Use \_\_\_\_\_ Closets in addition ( )yes ( )no

Water Supply: (X) County ( ) Well (No. dwellings \_\_\_\_\_) ( ) Other

Sewage Supply: (X) New Septic Tank (Must fill out New Tank Checklist) ( ) Existing Septic Tank ( ) County Sewer ( ) Other

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? ( ) YES (X) NO

Structures on this tract of land: Single family dwellings \_\_\_\_\_ Manufactured Homes \_\_\_\_\_ Other (specify) \_\_\_\_\_

Required Residential Property Line Setbacks: PRDP Comments: \_\_\_\_\_

Front	Minimum	<u>35</u>	Actual	<u>57.2</u>
Rear		<u>25</u>		<u>44.7</u>
Side		<u>10</u>		<u>20.4</u>
Sidestreet/corner lot		<u>20</u>		<u>45+</u>
Nearest Building on same lot		<u>10</u>		<u>---</u>

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 plans 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 false information is provided on this form.

Quinn Wall  
Signature of Owner or Owner's Agent

2-29-12  
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

Please use Blue or Black Ink ONLY

REAR.....25'

(10)

15' WETLAND CONSERVATION BUFFER ZONE

N66°59'26"E

17.07'

20' DRAINAGE EASEMENT WETLANDS

20.0'

JACOB STREET 50' R/W (PUBLIC)

C1

C2

57.2'

WETLAND BUFFER

223.67'

44.7'

DRIVE

20.8'

20.4'

227.17'

23648 SF  
0.543 AC

(9)

N05°43'51"W

S39°32'42"W

AREA DISTURBED IN WETLANDS  
292 SF  
0.007 AC  
AREA DISTURBED IN BUFFER  
552 SF  
0.013 AC  
TOATL AREA DISTURBED  
884 SF  
0.020 AC

(8)

SITE PLAN APPROVAL

DISTRICT RA20M USE SFD

#BEDROOMS 3

2-29-12

[Signature]  
ZONING ADMINISTRATOR

NUMBER	RADIUS	ARC LENGTH	CHORD DIRECTION	CHORD LENGTH
C1	145.00	97.14	S29°37'08"E	95.33
C2	525.00	15.87	S49°41'41"E	15.87

NOTES:

PUBLIC WATER SYSTEM  YES  NO  
 WELL  YES  NO  
 PUBLIC SEWER SYSTEM  YES  NO  
 HOUSE DIMENSIONS: 56' x 32'

IMPERVIOUS SURFACE TABLE

HOUSE.....1669 SF  
 DRIVE & WALK.....1331 SF  
 TOTAL.....3000 SF  
 LOT AREA.....23648 SF  
 PERCENTAGE OF IMPERVIOUS AREA.....12.7%

DOES LOT HAVE STATE ROAD FRONTAGE?  YES  NO  
 DOES LOT HAVE RECORDED EASEMENT?  YES  NO

DRIVEWAY OR ACCESS DRIVE DRAINAGE CULVERT  
 TYPE AND SIZE \_\_\_\_\_

STORMWATER ADMINISTRATOR SIGNATURE \_\_\_\_\_

PLOT PLAN  
 OF  
**LOT 9**  
**JONATHAN RIDGE**  
**HARNETT COUNTY**  
 FOR

**TRUE LINE SURVEYING, P.C.**



205 W. MAIN STREET  
 CLAYTON, N.C. 27520  
 TELEPHONE: (919) 359-0427

OWNER NAME: SCOTT LEE HOMES, INC.

APPLICATION #: \_\_\_\_\_

**\*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)

**DEVELOPMENT INFORMATION**

- 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
- Public water
- Spring

Are there any existing wells, springs, or existing waterlines on this property?  yes  no  unknown

**SEPTIC**

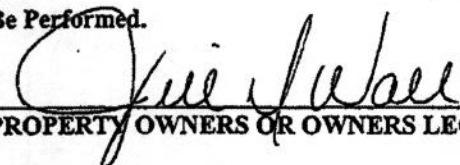
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- 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?

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.

  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2-29-12  
DATE