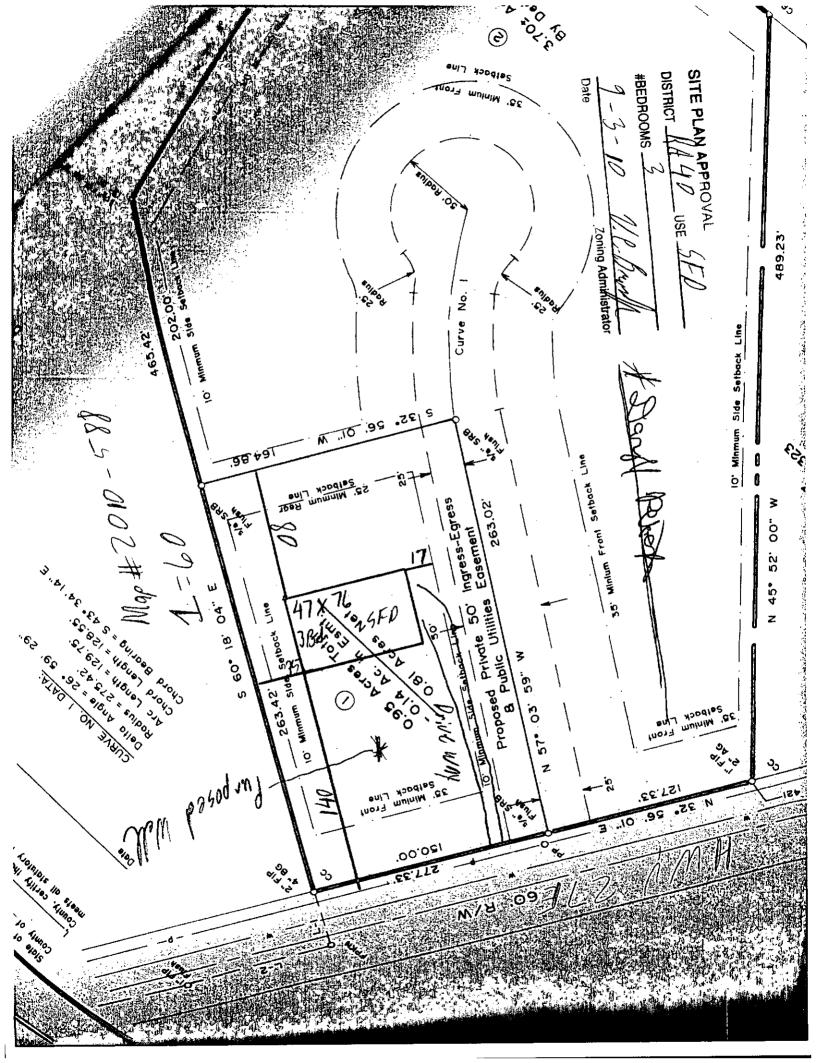
Initial Application Date: 9-3-10  Application # 10 500 25146
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  Central Permitting 108 E. Front Street, Lillington, NC 27548 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER: Daryl Roberts Mailing Address: 2466 NC55W
City: Coats State: NC Zip: 2750 Contact # 9KJ-427 LL997 Email: Mermoid2550 mail. (4
APPLICANT*: 29/10 Mailing Address:
City: State: Zip: Contact # Email:  *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Darull Roberto Phone #
PROPERTY LOCATION: Subdivision: Lot #: / Lot Size; 195
State Road # State Road Name: NU 27E Map Book&Page: /
Parcel: 07 0692 0163 8 PIN: 0589-29-7662,000
Zoning: RA 4º Flood Zone; Watershed: The Deed Book&Page: 2010, 588 Power Company*:
*New structures with Progress Energy as service provider need to supply premise number
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 27 gut of Brus Crok towards
Cooks T/R on oid 27 where the travor travers so through a almost
to the end the kind is on Left hand side.
PROPOSED USE:    SFD: (Size   C   x   1 ) # Bedrooms: 3 # Baths   Basement(w/wo bath):   A Garage: 2   Deck: 1   Crawl Space: 1   Slab:   NA Sl
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes ()no
Water Supply: County Existing Well New Well (# of dwellings using well) *MUST have operable water before final
Sewage Supply: _X New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) County Sewer  Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes ()no
Structures (existing or proposed) Single family dwellings: Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum 36 Actual 140
Rear <u>25 80</u>
Closest Side
Sidestreet/corner lot
Nearest Building
f 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
hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

\*\*This application expires 6 months from the initial date if permits have not been issued\*\*
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION



	APPLICATION #: 10 500 25 146				
*This application to be filled out when applying for a septic system inspection.*					

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

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)

910-893-7525 option 1

CONFIRMATION #

Environmental Health New Septic System Code 800

All property Irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.

Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.

Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.

- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
   If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil
- If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. *Do not grade property*.
- All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code
   800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

#### Environmental Health Existing Tank Inspections Code 800

NAME:

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if
  multiple permits, then use code 800 for Environmental Health inspection. <u>Please note confirmation number given</u>
  at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

<u>SEPTIC</u>						
If applying	for authorization	on to construct please indic	ate desired system type(s): ca	in be ranked in order of preference, must choose one.		
{}} Acce	epted	{}} Innovative	{X} Conventional	{}} Any		
{}} Alter	mative	{}} Other		_		
The applica question. It	int shall notify f the answer is	the local health departme "yes", applicant MUST	ent upon submittal of this app ATTACH SUPPORTING	plication if any of the following apply to the property in DOCUMENTATION:		
{_}}YES	{ <b>X</b> } №	Does the site contain any	y Jurisdictional Wetlands?			
{_}}YES	<b>◯</b> ∤NO	Do you plan to have an <u>irrigation system</u> now or in the future?				
{}}YES	ES {X} NO Does or will the building contain any <u>drains?</u> Please explain					
{}}YES	YES { \( \sqrt{1}\) NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?					
{_}}YES	{}YES					
[]YES	YES {_}} NO Is the site subject to approval by any other Public Agency?					
{}}YES	$\{X\}$ no	Are there any easements or Right of Ways on this property?				
{}}YES	(X) NO	Does the site contain any	y existing water, cable, phon	e or underground electric lines?		
		If yes please call No Cu	its at 800-632-4949 to locate	the lines. This is a free service.		

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)

9-38-2010 DATE

## **Harnett County Department of Public Health**

### **Well Construction Permit Application**

If the information in the application for a Well Construction Permit is falsified, changed, or the site is altered, then the Well Construction Permit shall become invalid.

<b>APPL</b>	<u> ICANT</u>	INFORM	<u>IATION</u>

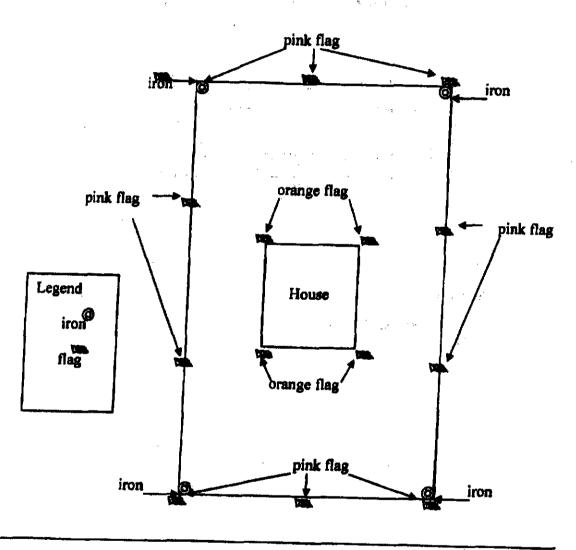
Darrll Roberto	(919) 427-4997
Applicant/Owner	Phone Number
STEGNO 55 W Cogts, V	16 37231
Street Address, City, State, Zip Code	
The Applicant must submit a Site Plan. The Site Plan 1. existing and/or proposed property lines and easements w 2. the location of the facility and appurtenance; 3. the location for the proposed well; 4. the location of existing or proposed sewer lines and/or s 5. the location of any existing wells within 100 feet of the 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 10	with dimensions;  ewage disposal systems within 100 feet or the proposed well;  property; surface water bodies;
The Applicant shall notify the Harnett County Health Division of Environmental Health if any of the followin 1, there is a relocation of the proposed facility; 2, there is a change in the intended use of the facility; 3, there is a need for installing the waste water system in at 4, there are landscape changed that affect site drainage.  Contact information: Environmental Health Country III	g occur prior to well construction:  n area other than indicated on the well permit; or  alth Division - 910-893-7547
PROPERTY	<u>NFORMATION</u>
Proposed	use of well
Single-Family Multifamily Church □	
Street Address  Parcel # 07 0692 0163	Subdivision/Lot # / PIN # 0589 - 29 - 7662,000
1	to the Site
	and side
I have thoroughly read and completed this Application and cer correct to the best of my knowledge and is give in good faith. R state officials are granted right of entry to conduct necessary in	epresentatives of the Harnett County Health Department and
I understand that I am solely responsible for the proper identification making the site accessible so that a will can be properly constructed	on and labeling of all property lines, underground utility lines, and according to the permit.
Q uni	0 0 0

Property Owner's of Owner's Legal Representative Signature Required

out of

# How to Properly Mark Property for Soil Evaluation

(MUST MATCH SITE PLAN)



ROAD



HARNETT COUNTY TAX ID#
8.18.16 BY 503

FOR REGISTRATION REGISTER OF DEEDS
KIMBERTY S. HARGEROVE
18 12:01:49 PM
8K:2775 PG:755-757 FEE:\$22.00

INSTRUMENT # 2010011702

#### NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: 0.00	7. 6			
Parcel Identifier No.  By:	Verified by		County on the	day of, 20
Mail/Box to: Grantees			** ** ** *** *** *** *** *** *** *** *	
This instrument was prepared by:	Ray McLean - Atto	orney (d	eed prep only)	
Brief description for the Index:				
THIS DEED made this 16th		day of	August	$,20^{\hbox{\scriptsize $10$}}$ , by and between
GRANTOR			GRAN	TEE
Milton Ray Roberts and wi Nancy Stout Roberts	fe,	Ma 24	ryll Scott Robe rina Roberts 66 NC 55W ats, NC 27521	rts and wife,
Enter in appropriate block for each particle of the designation Grantor and Grantee a singular, plural, masculine, feminine of	s used herein shall includ	le said parti		
WITNESSETH, that the Grantor, for a and by these presents does grant, bargain the City of	valuable consideration pa n, sell and convey unto the Neills	id by the G	rantee, the receipt of was fee simple, all that cer Township,	which is hereby acknowledged, has tain lot or parcel of land situated in armet t
North Carolina and more particularly d	lescribed as follows:			·
Being all of lot #1 contain utilities easement as show	ning .95 total ac n on map #2010-58	res wit 8 of th	h a 50ft ingres e Harnett Count	s, egress and public y Registry.
The property hereinabove described wa	s acquired by Grantor by	instrumen	t recorded in Book	nage
A map showing the above described pr				
NC Bar Association Form No. 3 © 197 Printed by Agreement with the NC Bar	6, Revised © 1977, 2002			+ James Williams & Co., Inc. www.JamesWilliams.com