nitial Application Dat	الألايام		SCANNED		plication # 11-500-	26911
nitial Application Dat	ie: Oft 1/1/	 -	Fig. 18 Sept. (Sept. 1997)	_, Ap _l	· · · · · · · · · · · · · · · · · · ·	<u> 20 (1)</u>
Central Permitting	108 E. Front Stree	COUNTY OF HAI et, Lillington, NC 27546	RNETT RESIDENTIAL Phone: (910) 8		-	www.harnett.org/permits
ANDOWNER: Wate	ermark Homes, Inc	g	Mailing Add	tress: 1308 Fort E	Bragg Road	
City: Fayetteville		State: NC Zip: 28	305 Contact # (910	0) 483-2229	Email: allison@w	atermarkhomesnc.cc
APPLICANT*: Wate	mark Homes, Inc.		Mailing Add	_{fress:} 1308 Fort E	Bragg Road	
City: Fayetteville		State: NC Zip: 28	305 Contact # (910	0) 483-2229	Email: allison@w	atermarkhomesnc.cc
		E: Christa Duffer - Si			Phone # (910) 237-15	
		arolina Seasons Co			Lot #: 110	
					Map Book&Pa	
Parcel: <u>09956703 (</u>	0006 53	 -	PIN: 9556	69-6298.000	_Power Company*: Go	
Zoning: <u>RAZOR</u> F	lood Zone: X	Watershed: N/A	Deed Book&Page:_0	2804 _/ 0545	Power Company*: Ge	eneral EMC
*New structures with	Progress Energy as	service provider need	to supply premise num	nber	from	n Progress Energy.
SPECIFIC DIRECTION	ONS TO THE PROP	ERTY FROM LILLING	TON:			
From NC-87, turn	left on Milton Welc	sh Rd - drive 1.5 mile	es, turn left on Pond	erosa Rd - drive	0.04 miles, turn right	on Ponderosa Trail
- drive 2.0 miles a	nd Season Drive is	on your left.				
D: Mod: (Size	(is the bonu x) # Bedroor (is the seco	us room finished? () ms# Baths Ba ond floor finished? ()) yes (≝)no w/ a clos esement (w/wo bath)_) yes ()no Any ot	et? () yes (🗹) Garage: S her site built additio	no (if yes add in with # ite Built Deck; On	Frame Off Frame
			No. Bedrooms Per			
	on: # Rooms:		Hou			#Employees:
					Closets in a	addition? () yes ()no
Water Supply:	CountyExi	sting Well Nev	v Well (# of dwellings u	sing well	_) *MUST have operabl	e water before final
					hecklist) County	
					00') of tract listed above?	
	•				Other (spe	
•	al Property Line Set		mments:			
Front Minimum	_	<u>36.07'</u> _				
Rear .		<u>172.37</u> ' _				
Closest Side	<u> 10'</u> _					
Sidestreet/comer lot_ Nearest Building	<u> 20 </u>	<u> 38.05</u> ' _				
on same lot						
If permits are granted thereby state that fo	I I agree to conform I regoing statements a	to all ordinances and la tre-accurate and corre-	aws of the State of Nor ct to the best of my kno	owledge. Permit su	bject to revocation if fals	pecifications of plans submit se information is provided.
	72	-			14-11	
	Signatu	re of Owner or Owne	rs Agent		Date	

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 #: 11- 500-26911

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 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. If property is thickly wooded. Environmental Health requires that you clean out the undergrowth 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 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. Please note confirmation number given at end of recording for proof of request. Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits. If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. { | Conventional 3 Any اك} Innovative {__}} Accepted { } Other { } Alternative 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. -{**X**} NO { }YES Does the site contain any Jurisdictional Wetlands? { }YES Do you plan to have an <u>irrigation system</u> now or in the future? { }YES {**X**} NO Does or will the building contain any drains? Please explain. {**∠**} NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property? {___}}YES { }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 { } NO Are there any easements or Right of Ways on this property? {X}YES { } NO 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. 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.

E-Health Checklist 1 of 1 05/10

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

