	1	1/	- 1/
Initial Application Date	6	-16-	<u>[/</u>

Application #	11500	26	921
	CU#		

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E Front Street Lillington NC 27546 Phone (910) 893 7525 ext 2 Fax (910) 893 2793 www harnett org/permits

Central Permitting

A RECORDED SURVEY MAP RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

ANDOWNER Stone Cross	LLC	Mailing Address	25 Whispering Pines Drive	
Spring Lake	State NC Zip	28390 Contact No 910 814-	2633 Email Jbmang	um@andersoncreekclub.c
PLICANT		Mailing Address	La de la constante de la const	
tytout applicant information	State Zip	Contact No	Email	
.,			040,000,0	740
NTACT NAME APPLYING	IN OFFICE Hal Owen Ha	I Owen & Associates	Phone #	743
ROPERTY LOCATION Subd	Stone Cross		Lot#	2 Lot Size 16 670 sq
ate Road # 1120	_ State Road Name Overl	hills	Map Book 8	RPage 2011 / 347
rcel010535 0100 92	***	PIN 0515 30-453	6 000	
ning RA 20R Flood Zone	None Watershed N/A	Deed Book & Page 01435	/0493 Power Company	
ew structures with Progress I	Energy as service provider r	need to supply premise number		from Progress Energy
		Basement(w/wo bath) Gard Gard Gard Gard Gard		
		Basement (w/wo bath) Gard		
Manufactured Home	_SWDWTW (Size_	x) # Bedrooms	Garage(site built?) D	eck(site built?)
Duplex (Sizex) No Buildings	No Bedrooms Per Unit		
Home Occupation #Room	ms Use	Hours of Op	peration	#Employees
Addition/Accessory/Other	(Sizex) Use _		Closets	in addition? () yes () no
ater Supply County	Existing Well	_ New Well (# of dwellings using we	ell) *Must have ope	rable water before final
ewage Supply <u>√</u> New S	eptic Tank (Complete Chec	klist) Existing Septic Tank (Complete Checklist) Co	ounty Sewer
oes owner of this tract of land	d own land that contains a r	manufactured home within five hund	Ired feet (500) of tract listed ab	ove? () yes (√_) no
pes the property contain any	easements whether underg	round or overhead () yes () no	
ructures (existing or propose	ed) Single family dwellings_	1 proposed Manufactured H	omes Other	(specify)
equired Residential Prope	rty Line Sethacks	Comments		
ont Minimum 35	Actual 72 5			
ear 25	35'			
losest Side 10	۳۲ ا			
idestreet/corner lot 20				
earest Building				
n same lot	d Use Application	Page 1 of 2		03/11

			E PROPERTY FROM L t 4 miles Turn right o							ake Turn right	
Turn	left	onto	Stonehurst	Drive	,						
If permits in hereby s	are granted tate that for	I agree to egoing stat	conform to all ordinance ements are accurate an Signature of Owner of	d correct to	the best of m	of North Ca y knowledo	rolina regui ge Permit	subject	ch work and the to revocation if f	e specifications o alse information	f plans submitted is provided

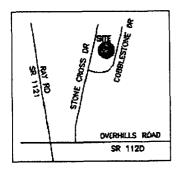
***It is the owner/applicants responsibility to provide the county with any applicable information about the subject property including but not limited to boundary information house location underground or overhead easements etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications **

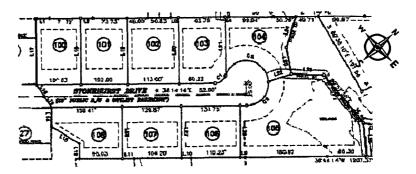
**This application expires 6 months from the initial date if permits have not been issued *

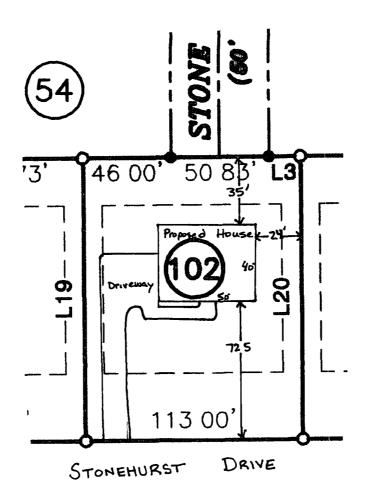
Site Plan

Stone Cross Subdivision, Section 2, Phase 2

Lot # 102







Scale
1 inch = 50 feet

SITE PLAN APPROVAL

DISTRICT A 201 USE 5

#BEDROOMS 3

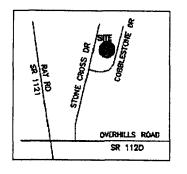
6-16-11

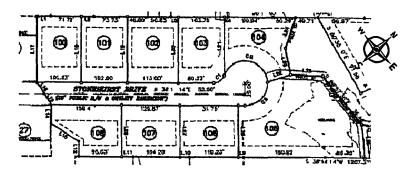
Zoning Administrator

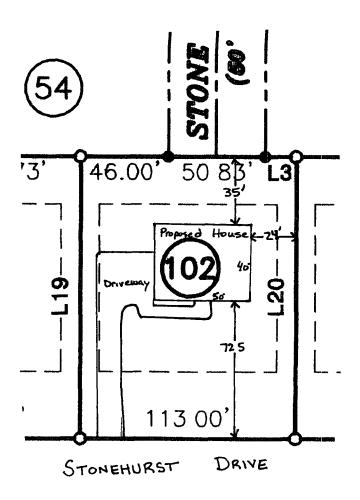
Date

Stone Cross Subdivision, Section 2, Phase 2

Lot # 102







Scale
1 inch = 50 feet

SEPTIC SYSTEM LAYOUT DESIGN

Subdivision_	Stone Cross	Lot # _	102
# Bedrooms	3	Daily Flow <u>360 gallons</u>	
House Footpr	ant 40ft x 50ft	Setbacks 65-70ft Front	

Proposed System

Initial System

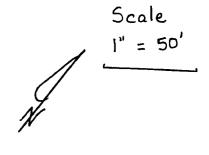
Pump to 25% reduction type drainlines 3 X 40 ft (X3ft wide), LTAR 0 8 gal/day/sqft Install on-contour at 18-24 inches below surface

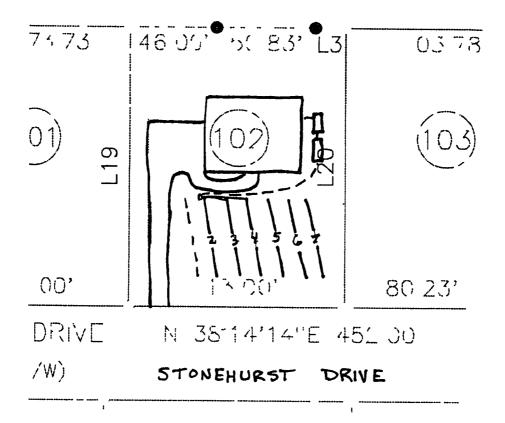
Repair System

Pump to 25% reduction type drainlines 3 X 40 ft (X3ft wide), LTAR 0 8 gal/day/sqft Install on-contour at 18-24 inches below surface

Lines flagged at site on 9 ft centers

Line #	Line	Initial or Repair	Drainline Length(ft)	Measured Field Line Length(ft)	Relative Elevation(ft)
1	В			65	100 00
2	Y	Initial	50	61	100 37
3	R	Initial	50	55	101 08
4	W	Initial	50	50	101 52
5	В	Repair	50	51	101 93
6	Y	Repair	50	56	102 18
7	R	Repair	50	57	102 60





Soil Science Investigations • Wetland Delineations, Permitting, and Consulting

NAME		APPLICATION #	
2.02		*This application to be filled out when applying for a septic system inspection *	
IF THE	INFORMATION I OR AUTHORIZA Ig upon documenta	Department Application for Improvement Permit and/or Authorization THIS APPLICATION IS FALSIFIED CHANGED OR THE SITE IS ALTERED THEN THATION TO CONSTRUCT SHALL BECOME INVALID The permit is valid for either 60 month auton submitted (Complete site plan = 60 months Complete plat = without expiration)	IE IMPROVEMENT
\/_	910-893-7525	option 1 CONFIRMATION #	
En En	All property	lealth New Septic System Code 800 irons must be made visible Place "pink property flags" on each corner iron clearly flagged approximately every 50 feet between corners	
	Place "orange	house corner flags" at each corner of the proposed structure. Also flag drivew swimming pools, etc. Place flags per site plan developed at/for Central Permitti Environmental Health card in location that is easily viewed from road to assist in	ing
•	If property is the	hickly wooded, Environmental Health requires that you clean out the <u>undergro</u> pe performed. Inspectors should be able to walk freely around site. <i>Do not gra</i> n	owth to allow the soi de property
•	All late to be	addressed within 10 business days after confirmation \$25 00 return trip tuncover outlet lid, mark house corners and property lines, etc. once lot co	fee may be incurred
•	After preparing	g proposed site call the voice permitting system at 910-893 7525 option 1 to scienting notification permit if multiple permits exist) for Environmental Health inspumber given at end of recording for proof of request	hedule and use code
-	Use Click2Gov	or IVR to verify results. Once approved, proceed to Central Permitting for per	mits
	<u>/ironmental He</u>	ealth Existing Tank Inspections Code 800 Instructions for placing flags and card on property	
•	Prepare for inspossible) and t	spection by removing soil over outlet end of tank as diagram indicates and then put ild back in place (Unless inspection is for a septic tank in a mobile his ELIDS OFF OF SEPTIC TANK	lift lid straight up (if ome park)
	After uncovering	ng outlet end call the voice permitting system at 910-893 7525 option 1 & selection system at 910-893 7525 opt	ect notification permit confirmation number
	Use Click2Gov	or IVR to hear results. Once approved, proceed to Central Permitting for rema	uning permits
SEPTIC If apply:	: ng for authorizati	on to construct please indicate desired system type(s) can be ranked in order of preference	must choose one
{2} A		{} Innovative {	
	lternative	{}} Other	
The appl question	icant shall notify If the answer is	the local health department upon submittal of this application if any of the following a 'yes' applicant MUST ATTACH SUPPORTING DOCUMENTATION	apply to the property in
{, YE	; { <u>✓</u> } NO	Does the site contain any Jurisdictional Wetlands?	
{_}}YE	; { <u>√</u> } №	Do you plan to have an <u>irrigation system</u> now or in the future?	
{_}}YES	r	Does or will the building contain any drains? Please explain	
()YES	,	Are there any existing wells springs waterlines or Wastewater Systems on this proper	erty?
{}}YES	1	Is any wastewater going to be generated on the site other than domestic sewage?	
(_)YES		Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property?	
{_ YES	/	Does the site contain any existing water, cable, phone or underground electric lines?	
{}}YES		If yes please call No Cuts at 800-632-4949 to locate the lines This is a free service	
I Waya Da	ad This Annlicati	ion And Certify That The Information Provided Herein Is True, Complete And Correct. A	Authorized County And
State Offi	cials Are Granted	Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Appli	cable Laws And Rules
I Underst	and That I Am So	slely Responsible For The Proper Identification And Labeling Of All Property Lines And C	Corners And Making
The Site A	ccessible So That	A Complete Site Evaluation Can Be Performed.	6-15-11
PROPER	TY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	6-15-1/ DATE

