Initial Application Date	6	-/	6-	11
Initial Application Date	6	-/	0-	_[[

Residential Land Use Application

Application #_	/	5	00	26	123
	^	l I#			

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

108 E Front Street Lillington NC 27546 Phone (910) 893 7525 ext 2 Fax (910) 893 2793 www.harnett.org/permits

03/11

A RECORDED SURVEY MAP RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION _____ Mailing Address _____125 Whispering Pines Drive LANDOWNER Stone Cross LLC State NC Zip 28390 Contact No 910-814-2633 Email jbmangum@andersoncreekclub.com Spring Lake Mailing Address ___ APPLICANT City _____ State ___ Zip ___ Contact No ____ Email ____ *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE Hall Owen Hall Owen & Associates Lot # 104 Lot Size 1706959 ft PROPERTY LOCATION Subdivision Stone Cross State Road # 1120 State Road Name Overhills _____ Map Book & Page 2011 / 347 PIN 0515 30-4536 000 Parcel 010535 0100 92 Zoning RA-20R Flood Zone None Watershed N/A Deed Book & Page O 1435 / O493 Power Company *New structures with Progress Energy as service provider need to supply premise number ________from Progress Energy **PROPOSED USE** Monolithic SFD (Size 40 x50) # Bedrooms 4 # Baths ___ Basement(w/wo bath) ___ Garage ___ Deck ___ Crawl Space ___ Slab ___ Slab ___ (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms) Mod (Size ___x__) # Bedrooms___# Baths___ Basement (w/wo bath)___ Garage ___ Site Built Deck ____ On Frame___ Off Frame___ (Is the second floor finished? (___) yes (___) no Any other site built additions? (___) yes (___) no Manufactured Home ___SW __DW __TW (Size ___x ___) # Bedrooms ___ Garage ___(site built?___) Deck ___(site built?___) Duplex (Size ____x ___) No Buildings _____ No Bedrooms Per Unit _____ Home Occupation # Rooms ______ Use _____ Hours of Operation _____ #Employees _ Addition/Accessory/Other (Size ____x___) Use _____ Water Supply County Existing Well Mew Well (# of dwellings using well) *Must have operable water before final Sewage Supply ___ 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 (Does the property contain any easements whether underground or overhead (yes) no Structures (existing or proposed) Single family dwellings 1 proposed Manufactured Homes _____ Other (specify) _____ Required Residential Property Line Setbacks Mınimum Front Rear 10 Closest Side Sidestreet/corner lot Nearest Building on same lot

SPECIFIC DIF	RECTIONS	TO THE	PROPERTY F	ROM LILLINGTO	N From Lillii	ngton take	NC 210 s	outh tov	vard Spring Lak	e Turn right	on
						Turn	right	on (Cobblestor	e Drive	2
Turn	left	01	Stonehu	rst Drive	<u>e</u>					*	
					<u>, , , , , , , , , , , , , , , , , , , </u>			•			
								<u> </u>	-		
If permits are I hereby state	granted I ag that forego	ing state	ements are accu	dinances and law trate and correct Mean	to the best of m	of North Ca ny knowled	rolina regula ge Permit s	ating suc subject to Date	h work and the sp o revocation if fals	ecifications of e information is	plans submitted s provided

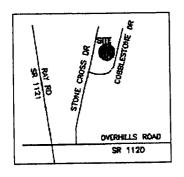
***It is the owner/applicants responsibility to provide the county with any applicable information about the subject property including but not limited to boundary information house location underground or overhead easements etc. The county or its employees are not responsible for any incorrect or missing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

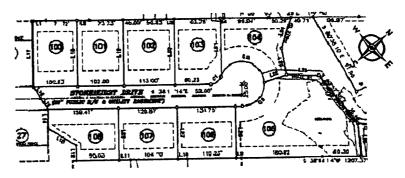
This application expires 6 months from the initial date if permits have not been issued

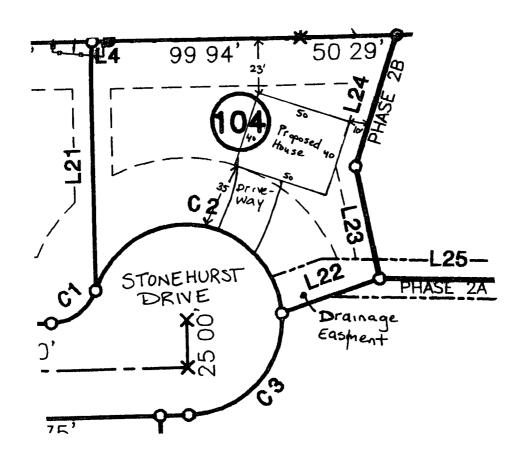
Site Plan

Stone Cross Subdivision, Section 2, Phase 2

Lot # 104







Date

Scale
1 inch = 50 feet

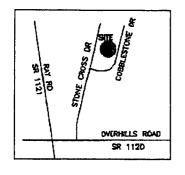
SITE PLAN APPROVAL

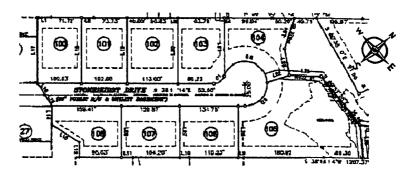
DISTRICT TO STANDARD USE SELECTION OF THE STANDARD SELECTION OF THE SELECTION OF THE STANDARD SELECTION OF THE SELECTION OF TH

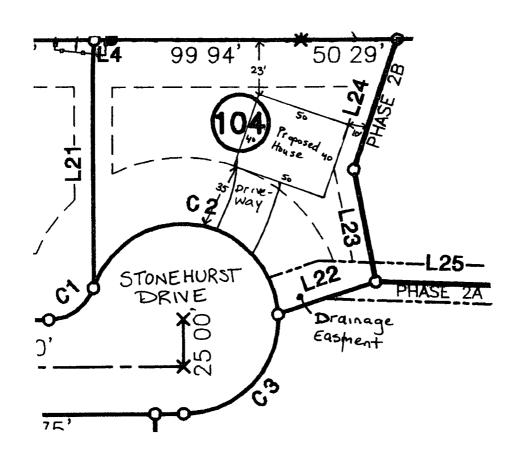
Site Plan

Stone Cross Subdivision, Section 2, Phase 2

Lot # 104







Scale
1 inch = 50 feet

NAME	APPLICATION #
	*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
TO THE INFORMATION	IN THIS APPLICATION IS FALSIFIED CHANGED OR THE SITE IS ALTERED THEN THE IMPROVEMENT
PERMIT OR AUTHORIZ	ATION TO CONSTRUCT SHALL BECOME INVALID The permit is valid for either 60 months or without expiration
depending upon document	ation submitted (Complete site plan = 60 months Complete plat = without expiration) CONFIRMATION #
910-893-7525	dealth 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 out buildings	e house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks 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
evaluation to	thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil 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 fallure to	uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready g proposed site call the voice permitting system at 910-893 7525 option 1 to schedule and use code
800 (after sel	g proposed site call the voice permitting system at 570 doc 750 permitting system at 570 permitting
Lise Click2Go	v or IVR to verify results Once approved, proceed to Central Permitting for permits
☐ Environmental H	lealth Existing Tank Inspections Code 800
- Follow above	inetractions for placing flags and card on property
- Propere for in	reportion, by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (ii
possible) and	then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)
- Adam companyon	E LIDS OFF OF SEPTIC TANK Ing outlet end call the voice permitting system at 910-893 7525 option 1 & select notification permit The second s
After uncoveri if multiple per	mits, then use code 800 for Environmental Health inspection Please note confirmation number
awan at and a	if recording for proof of request
 Use Click2Go 	v or IVR to hear results Once approved, proceed to Central Permitting for remaining permits
SEPTIC If applying for authorizat	ion to construct please indicate desired system type(s) can be ranked in order of preference must choose one
{2} Accepted	[] Innovative [] Conventional (; Any
(3) Alternative	{}} Other
The applicant shall notifiquestion If the answer is	y the local health department upon submittal of this application if any of the following apply to the property in applicant MUST ATTACH SUPPORTING DOCUMENTATION
{, YES (<u>√</u>) NO	Does the site contain any Jurisdictional Wetlands?
(_)YES (✓) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
$[]$ YES $[\frac{1}{2}]$ NO	Does or will the building contain any drains? Please explain
(_)YES (_)NO	Are there any existing wells springs waterlines or Wastewater Systems on this property?
(_)YES (√) NO	Is any wastewater going to be generated on the site other than domestic sewage?
_ YES (\sqrt{\sq}}}}}}\signt{\sqrt{\sq}}}}}\sqrt{\sq}}}}}}\sqrt{\sq}}}}}}}}}}\signt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}\signt{\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	Is the site subject to approval by any other Public Agency?
{ ✓ YES (_) NO	Are there any Easements or Right of Ways on this property?
(_)YES (<u>√</u>) 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 Applica	tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
State Officials Are Grante	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
I Understand That I Am S	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
The Site Accessible So Tha	at A Complete Site Evaluation Can Be Performed.
	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE
DDADEDTVAWNEDS	TIR TIMBERS LEGAL RELEGIOTATIVE SIGNATURE (1997 (1997)