

Initial Application Date 7/12/2011

Application # 1150027115

CU# \_\_\_\_\_

**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

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

**LANDOWNER** DSU Investments LLC Mailing Address 1011 Summerville Mamers Rd  
City Lillington State NC Zip 27546 Contact No 910 303 1967 Email stephentmilton@netzero.net

**APPLICANT** Stephen T Milton Mailing Address 1011 Summerville Mamers Rd  
City Lillington State NC Zip 27546 Contact No 910 303 1967 Email stephentmilton@netzero.net

\*Please fill out applicant information if different than landowner

**CONTACT NAME APPLYING IN OFFICE** Stephen T Milton Phone # 910 303 1967

**PROPERTY LOCATION** Subdivision N/A Lot # 1 Lot Size 69 A

State Road # NC Hwy 421 State Road Name \_\_\_\_\_ Map Book & Page 2011, 268

Parcel 130630015204 PIN 0630 85-8632 000

Zoning RA 30 Flood Zone N/A Watershed IV Deed Book & Page 02859 0484 Power Company Progress Energy

New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy

**PROPOSED USE**

SFD (Size 50 x 64) # Bedrooms 3 # Baths 2  Basement (w/wo bath) \_\_\_\_\_ Garage  Deck  Crawl Space  Slab \_\_\_\_\_ Monolithic 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 \_\_\_\_\_ Closets in addition? ( ) yes ( ) no

Water Supply  County \_\_\_\_\_ Existing Well \_\_\_\_\_ New 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 (  ) no

Does the property contain any easements whether underground or overhead ( ) yes (  ) no

Structures (existing or proposed) Single family dwellings New Construct Manufactured Homes \_\_\_\_\_ Other (specify) \_\_\_\_\_

**Required Residential Property Line Setbacks**

	Minimum	Actual
Front	<u>35</u>	<u>93.4</u>
Rear	<u>25</u>	<u>52.9</u>
Closest Side	<u>10</u>	<u>30</u>
Sidestreet/corner lot	<u>20</u>	<u>n/a</u>
Nearest Building on same lot	_____	_____

**Comments** There is an existing septic tank and drainfield on the property  
Additional drainfield will need to be added The two lines are marked with blue  
and yellow flags They are shown on the site plan as well

**SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON** Take HWY 421 North towards Sanford Approximately 3 miles from  
town just past Jim Christian road the lot will be on the left

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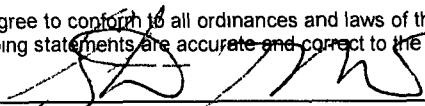
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If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted I hereby state that foregoing statements are accurate and correct to the best of my knowledge Permit subject to revocation if false information is provided

  
\_\_\_\_\_  
Signature of Owner or Owner's Agent

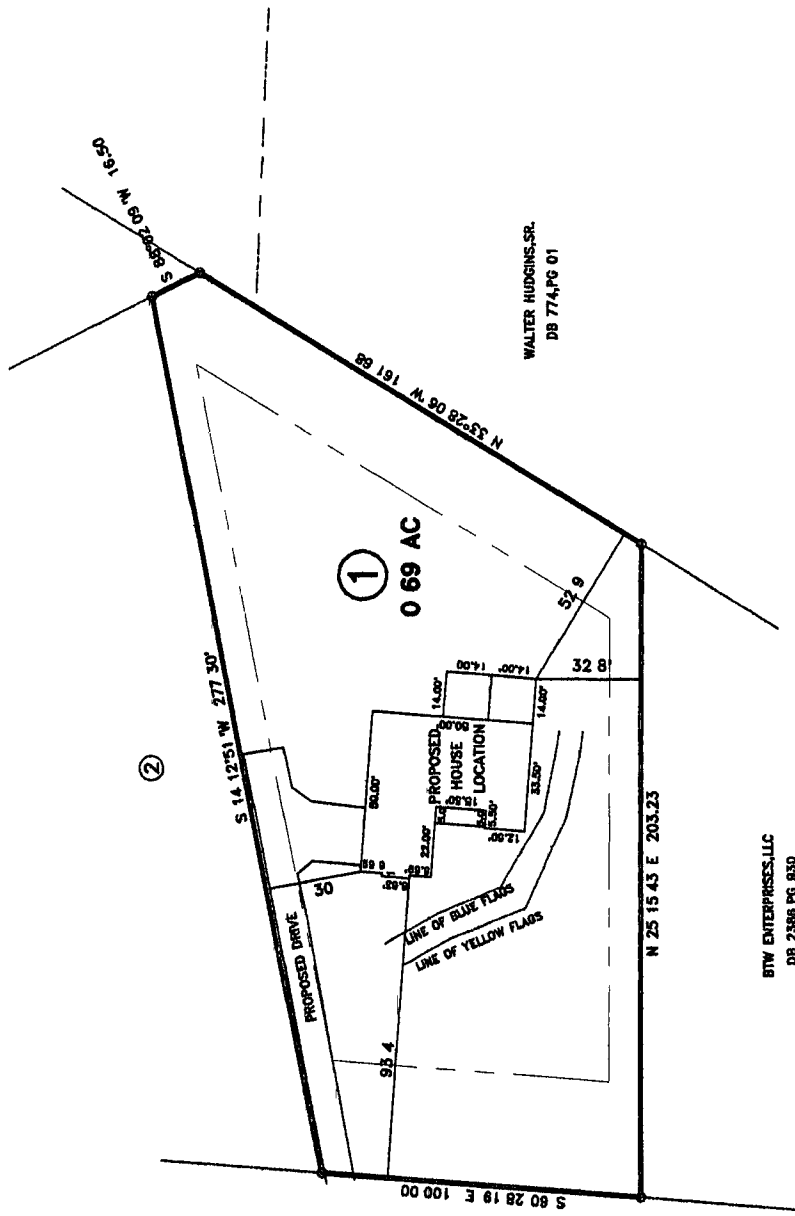
7/11/2011  
\_\_\_\_\_  
Date

**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\*\***

MAP REFERENCE MAP NO 2001-268

N C 6910 NORTH/AD 83



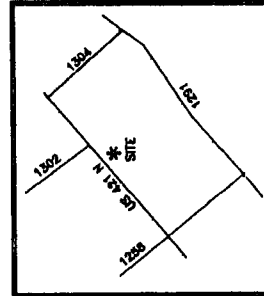
BTW ENTERPRISES, LLC  
DB 2388 PG 830  
PLAT CAB.F SLIDE - 696-D

WALTER HUDGINS, SR.  
DB 774, PG 01

US 421 N 150' R/W

SITE PLAN APPROVAL  
DISTRICT RA 30 USE SFD  
#BEDROOMS 3  
7-13-11 NE BMM  
Date Zoning Administrator

MINIMUM BUILDING SET BACKS  
FRONT YARD \_\_\_\_\_ 30  
REAR YARD \_\_\_\_\_ 25  
SIDE YARD \_\_\_\_\_ 10'  
CORNER LOT SIDE YARD \_\_\_\_\_ 20'  
MAXIMUM HEIGHT \_\_\_\_\_ 35



PROPOSED PLOT PLAN - LOT - 1  
D S U INVESTMENTS, LLC

BENNETT SURVEYS, INC. C-1080  
1662 CLARK RD LILLINGTON N C 27546  
(910) 893-5252

JOB NO 11177

TOWNSHIP	UPPER LITTLE RIVER	COUNTY	HARNETT	DATE	MAY 19, 2011
STATE	NORTH CAROLINA	SURVEYED BY		RVB	DRAWN BY
SCALE		1	60	FIELD BOOK	
DRAWING NO		DRAWING NO			

Tr #1

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**

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
- 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 800

- 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 **put lid back in place** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- 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

**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      { } Conventional      { } Any  
 { } Alternative      { } Other \_\_\_\_\_

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 Do you plan to have an irrigation system now or in the future?  
 { } YES { } 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 { } 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?  
 { } 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

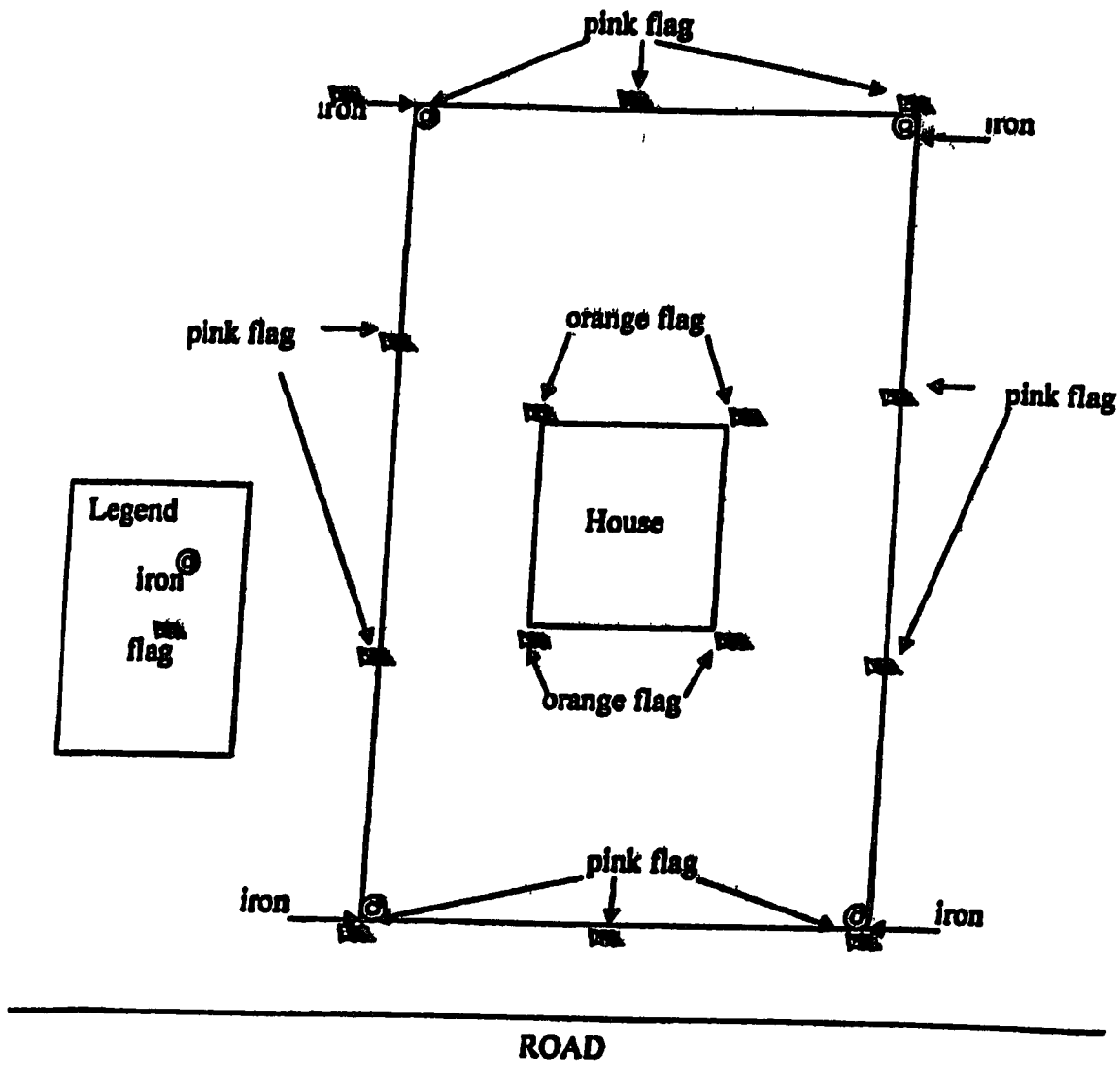
**I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules I Understand That I Am Solely Responsible 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**

\_\_\_\_\_  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

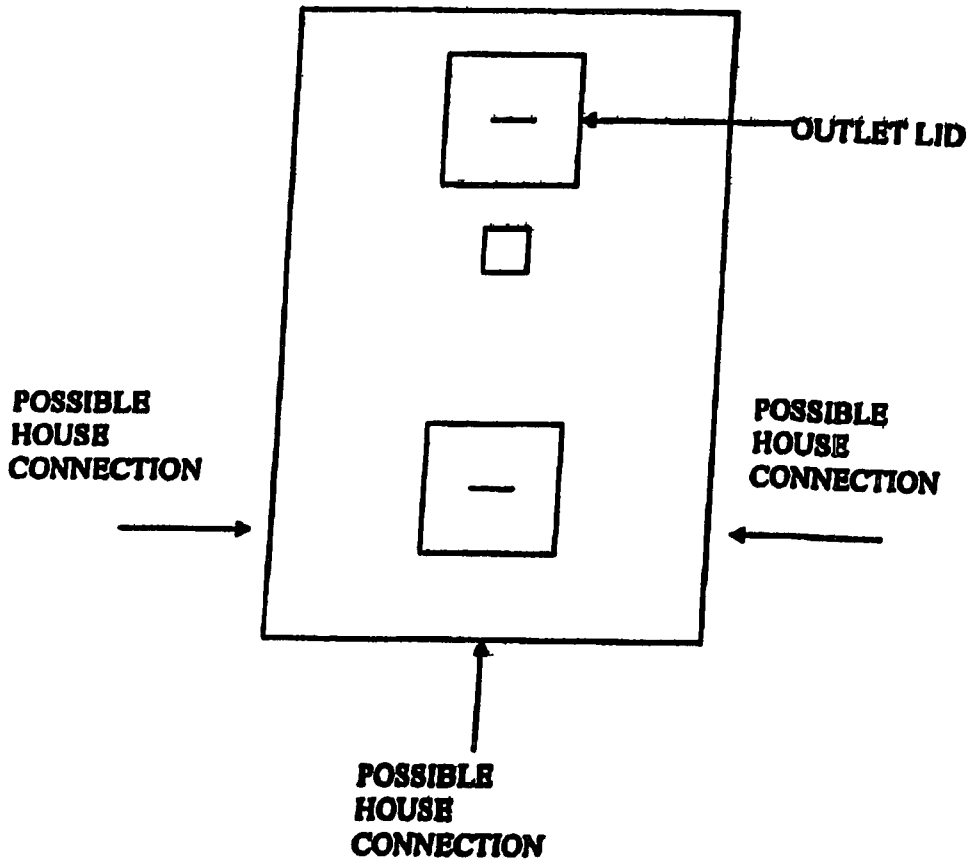
7/11/11  
DATE

# How to Properly Mark Property for Soil Evaluation

(MUST MATCH SITE PLAN)



**DIAGRAM OF A TYPICAL SEPTIC TANK**



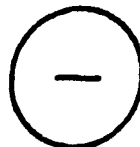
**POSSIBLE LID SHAPES**



**SQUARE (SHOWN ON DIAGRAM)**



**RECTANGLE (OLDER TANKS)**



**ROUND**