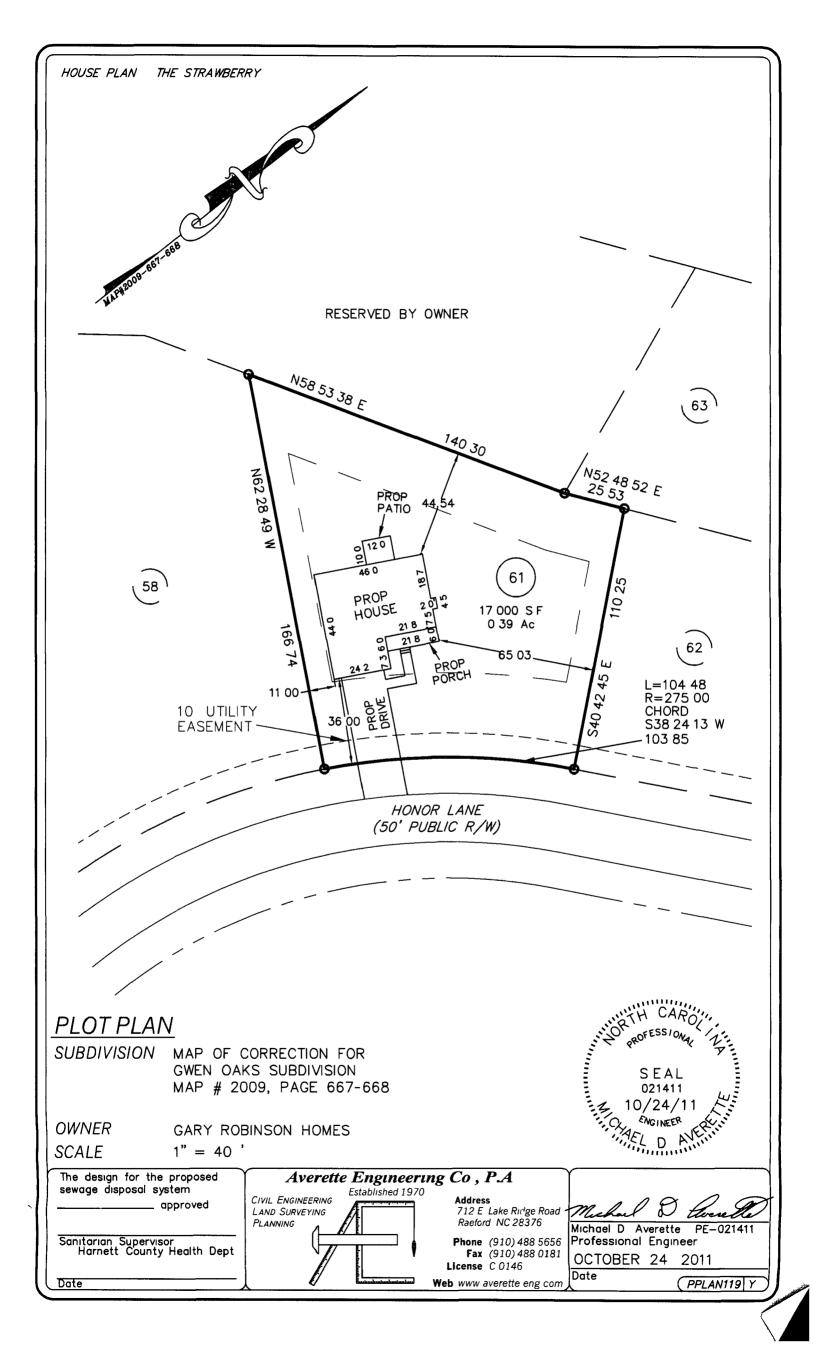
Initial Application Date $10 - 31 - 11$	Application # 11500 27802
COUNTY OF HARNETT RESIDENTIA  Central Permitting 108 E Front Street Lillington NC 27546 Phone (910)	
LANDOWNER H J Morris Const. Comp Mailing A	
City Raleigh State NC Zip 2760 Contact #_	
City Foundation if different than landowner	0-401-5505 Email gary rob mon Homeso yol
CONTACT NAME APPLYING IN OFFICE Billy Elmore	Phone # 910 - 128 - 1554
PROPERTY LOCATION Subdivision Gwen Oaks	Lot # Lol Lot Size - 39 al res
State Road # State Road Name NC2105	Map Book&Page 2009 / 66
Parcel 010547 0024 61 PIN 01	536-02-5706,000
Zoning RA 20BFlood Zone Watershed MA Deed Book&Page	2299/0298 Power Company Progress Energy
New structures with Progress Energy as service provider need to supply premise ne	umber <u>592 179 48</u> from Progress Energy
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON Huy	2105 approx 14 miles on
Left	
□ Mod (Sizex) # Bedrooms # Baths Basement (w/wo bath)  (Is the second floor finished? () yes ()no Any □ Manufactured HomeSWDWTW (Sizex) # Bedrooms □ Duplex (Sizex) No Buildings No Bedrooms Per □ Home Occupation # Rooms Use Use Home Occupation # Rooms Use Use Use	closet? () yes ()no (if yes add in with # bedrooms)
Front Minimum Actual	
Rear	
Closest Side	
Sidestreet/corner lot	
Nearest Building on same lot	
If permits are granted I agree to conform to all ordinances and laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby state that foregoing statements are accurate and correct to the best of my laws of the State of Note I hereby statements are accurate and correct to the best of my laws of the State of Note I hereby statements are accurate and correct to the best of my laws of the State of Note I hereby statements are accurate and correct to the best of my laws of the State of Note I hereby statements are accurate and correct to the best of Note I hereby statements are accurate and correct to the statement and the statements are accurate and the st	North Carolina regulating such work and the specifications of plans submitted 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



NAME	APPLICATION #	
County Health De IF THE INFORMATION IN PERMIT OR AUTHORIZAT depending upon documentation 910-893-7525 of Environmental Heal Place pink pro every 50 feet be Place orange hout buildings sy Place orange E If property is the evaluation to be Call No Cuts to After preparing 800 (after select confirmation in Use Click2Gov Environmental Heal Follow above in	th New Septic System Code 800 perty flags on each corner iron of lot. All property lines must be clearly f	ion to Construct HE IMPROVEMENT this or without expiration lagged approximately ways garages decks ting in locating property owth to allow the soil ade property e service) chedule and use code pection Please note
inspection is for  • After preparing	r a septic tank in a mobile home park) trapdoor call the voice permitting system at 910 893 7525 option 1 & selection use code 800 for Environmental Health inspection Please note c	ct notification permit if
given at end o	f recording for proof of request or IVR to hear results. Once approved proceed to Central Permitting for rem	
SEPTIC If applying for authorization  [ Accepted	on to construct please indicate desired system type(s) can be ranked in order of preference  [	e must choose one
- · · · · · - · · · · · · · · · · · · ·	{} Other	
The applicant shall notify	the local health department upon submittal of this application if any of the following yes applicant must attach supporting documentation	apply to the property in
{_}}YES {\( \frac{1}{2} \) NO	Does the site contain any Jurisdictional Wetlands?	
{_}}YES {\\(\frac{1}{\times}\)} NO	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	
()YES (\(\sum_{\subset}\)NO	Are there any existing wells springs waterlines or Wastewater Systems on this pro	perty <sup>9</sup>
{_}}YES {_ <b>≠</b> } NO	Is any wastewater going to be generated on the site other than domestic sewage?	
(_)YES {\(\frac{\kappa}{\kappa}\)} 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	)
<b>/</b>	If yes please call No Cuts at 800 632 4949 to locate the lines This is a free service	•
I Have Read This Applicat	ion And Certify That The Information Provided Herein Is True, Complete And Correct.	Authorized County And
State Officials Are Granted	d Right Of Entry To Conduct Necessary Inspections To Determine Comphance With Ap	plicable Laws And Rules
	olely Responsible For The Proper Identification And Labeling Of All Property Lines And	l Corners And Making
The Site Accessible So Tha	t A Complete Site Evaluation Can Be Performed	
PROPERTY NUMBERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	10 - 31-01 DATE