Initial Application Date 4-3-12

ENVH Work copy

125-00 28667

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 STANCIL BULDERS, IJC Mailing Address 466 STANCIL Rd ALCIER 100 A LOCAL RD
LANDOWNER STANCIL BULDERS, INC Mailing Address 466 STANCIL Rd
A
City ANGIER State NC Zip 27501 Contact No Email
APPLICANT STANCIL BULDERS Mailing Address 466 STANCIL Rd
City Alger State C Zip 2750 Contact No Email
CONTACT NAME APPLYING IN OFFICE Richard DENAING Phone # 919-291-6240
PROPERTY LOCATION Subdivision PATTONS POINT Lot # 143 Lot Size . 356
State Road # 11 3 State Road Name 1,000 KA Map Book & Page 2008 / 148
Percel 039597 - 0225 23 PIN 9597 - 51 - 2232 000
Zoning IAZUR Flood Zone Watershed VA Deed Book & Page 2271 / 860 Power Company
New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE SFD (Size 43 x 36) # Bedroom 2 Baths 2 Basement(w/wo bath) V Garage V Deck Crawl Space Slab Slab Slab
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
Mod (Sizex)# 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 HomeSWDWTW (Sizex) # Bedrooms Garage(site built?) Deck(site built?)
□ Duplex (Sizex) No Buildings No Bedrooms Per Unit
Home Occupation # Rooms Use Hours of Operation #Employees #Employees
Addition/Accessory/Other (Sizex) UseClosets in addition? () yes () no
Addition/Accessory/Other (Sizex) UseClosets in addition? () yes () no Water SupplyCounty Existing Well New Well (# of dwellings using well) *Must have operable water before final
Addition/Accessory/Other (Sizex) 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
Addition/Accessory/Other (Sizex) Use
Addition/Accessory/Other (Sizex 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 Manufactured Homes Other (specify) Required Residential Property Line Setbacks Front Minimum 35
Addition/Accessory/Other (Sizex) Use
Addition/Accessory/Other (Sizex) Use
Addition/Accessory/Other (Sizex) Use

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON	
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina I hereby state that foregoing etatements are accurate and correct to the best of my knowledge F	a regulating such work and the specifications of plans submitted Permit subject to revocation if false information is provided Date

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

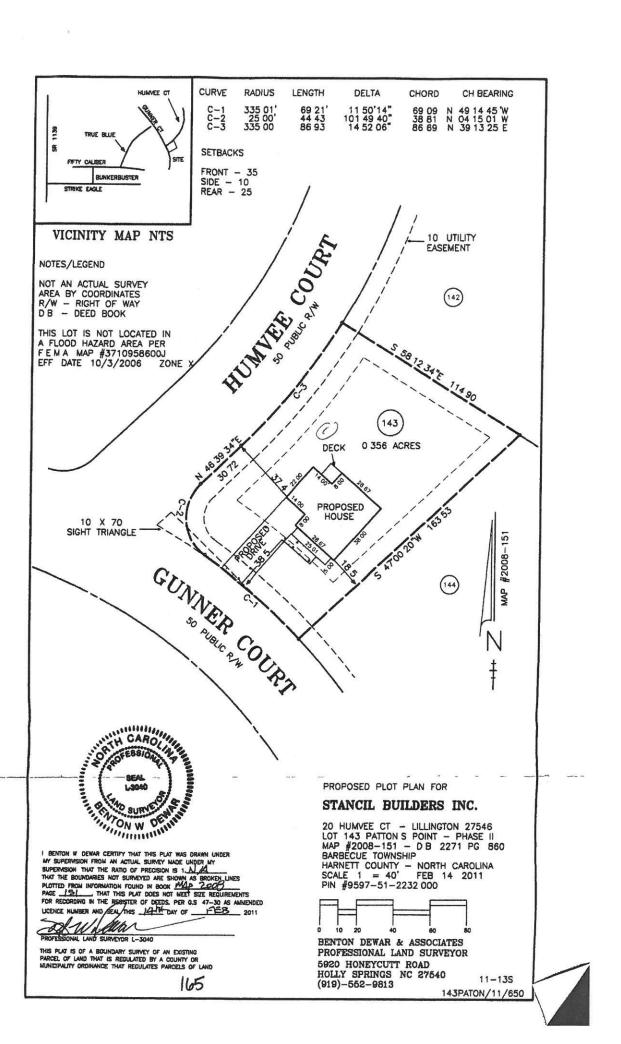
^{**} It is the owner/applicants responsibility to provide the county with any applicable information about the subject property including but not limited to boundary information house location underground or overhead easements etc. The county or its employees are not responsible for any incorrect or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

Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Sheet: Property ID: Lot #: File #: Code:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Locati Water Evalua Type o		d:□ Auge	Date Des Prop	e Evaluated: ign Flow (.1949): perty Recorded: Individual Pit Industrial	Property S Well Spring Cut Process Mixed	g 🗆 Ot	her			
P R O F I	.1940			ORPHOLOGY .1941	OTHER PROFILE FACTORS					
L E #	Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR	
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stem Typ	e(s)	-			Others Present:					



APPLICATION #	
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*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 proper 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 deck
 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 <u>undergrowth</u> to allow the se 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 not 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 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 (possible) and then put lid/back in place (Unless inspection is for a septic tank in a mobile home park) DONOT EAVE LIDS OFF OF SEPTIC TANK After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit 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
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property is 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 <u>irrigation system</u> now or in the future?
{}}YES {
{}}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 An
State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules
I Unders and That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE
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