

Initial Application Date 4-3-12

Application # 1250028669

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 STANCIL BUILDERS, INC Mailing Address 466 STANCIL RD
City ANDER State NC Zip 27501 Contact No _____ Email _____

APPLICANT STANCIL BUILDERS, INC Mailing Address 466 STANCIL RD
City ANDER State NC Zip 27501 Contact No _____ Email _____
Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE Richard DENNING Phone # 919 291-6240

PROPERTY LOCATION Subdivision PATTONS POINT Lot # 145 Lot Size 347

State Road # 1139 State Road Name Linger Map Book & Page 2008, 151

Parcel 039597 0225 25 PIN 9597-51-3036 000

Zoning R20R Flood Zone X Watershed WA Deed Book & Page 2271, 860 Power Company _____

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

PROPOSED USE

- SFD (Size 42 x 46) # Bedrooms 3 # Baths 2 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 _____ 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

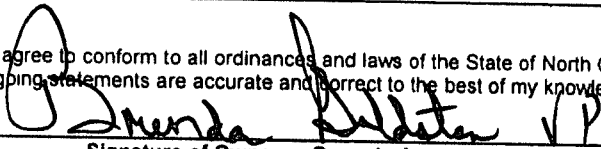
Structures (existing or proposed) Single family dwellings _____ Manufactured Homes _____ Other (specify) _____

Required Residential Property Line Setbacks		
Front	Minimum <u>35</u>	Actual <u>36</u>
Rear	<u>25</u>	<u>26</u>
Closest Side	<u>10</u>	<u>29</u>
Sidestree/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON

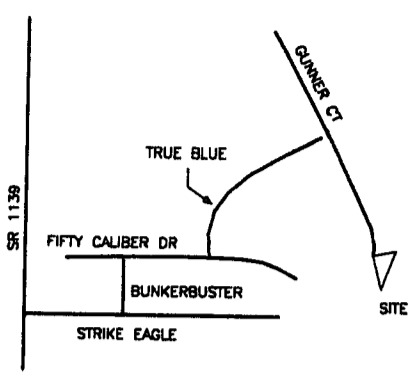
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted I hereby state that foregoing statements are accurate and correct to the best of my knowledge Permit subject to revocation if false information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


Signature of Owner or Owner's Agent

3-27-12
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



CURVE	RADIUS	LENGTH	DELTA	CHORD	CH BEARING
C-1	50 00	52 07	59 39 50"	49 75	N 08 39 24 W

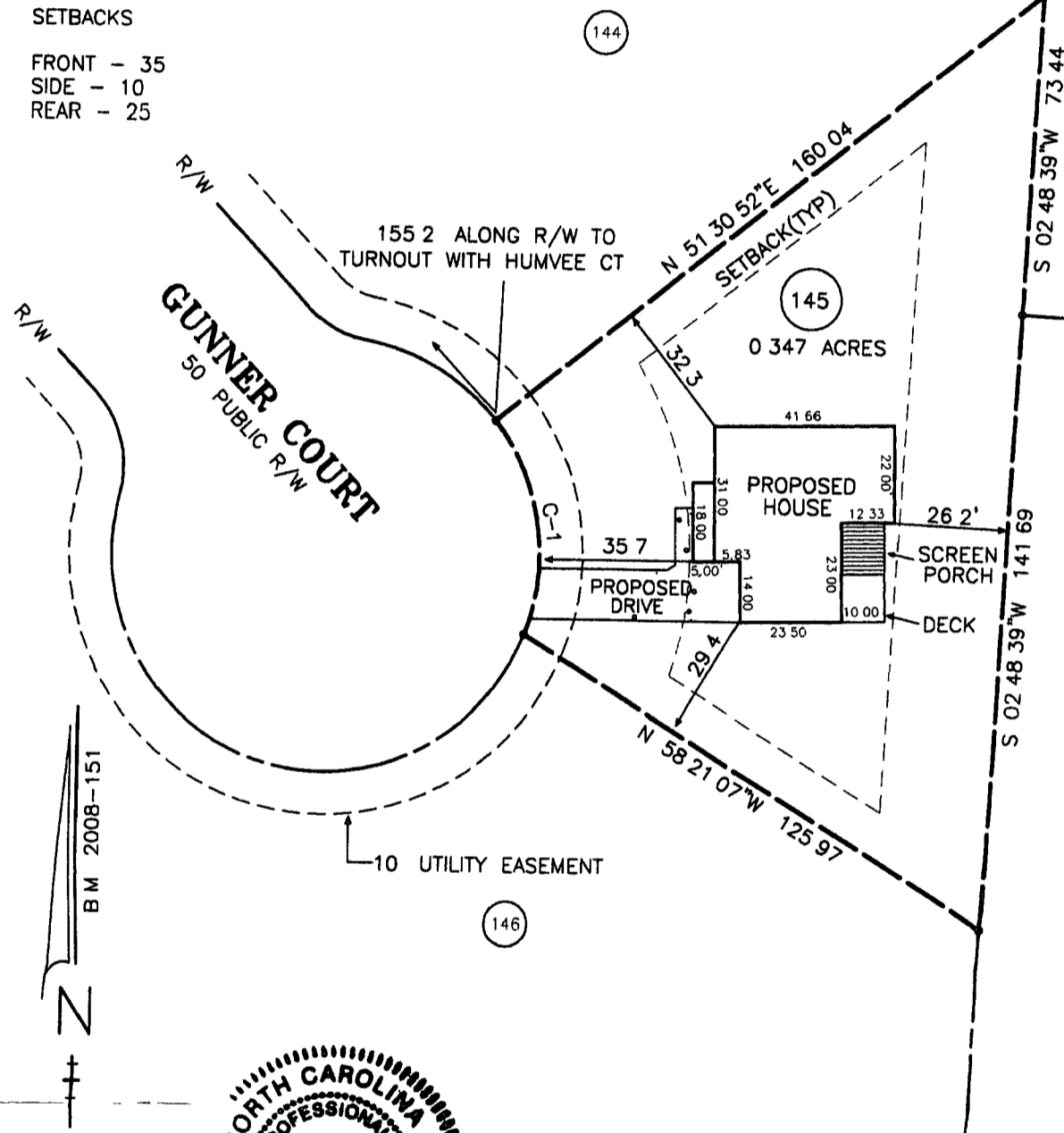
NOTES/LEGEND

NOT AN ACTUAL SURVEY
 AREA BY COORDINATES
 R/W - RIGHT OF WAY
 DB - DEED BOOK

THIS LOT IS NOT LOCATED IN
 A FLOOD HAZARD AREA PER
 FEMA MAP #3710958600J
 EFF DATE 10/3/2006 ZONE X

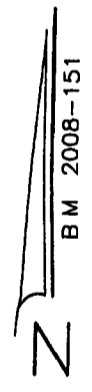
VICINITY MAP NTS

SETBACKS
 FRONT - 35
 SIDE - 10
 REAR - 25



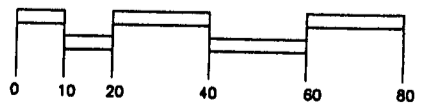
THOMAS IRWIN
 DB 1237 PG 179

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 DB 1237 PG 179



PROPOSED PLOT PLAN FOR
STANCIL BUILDERS INC.

187 GUNNER CT - LILLINGTON 27546
 LOT 145 PATTON'S POINT - PHASE II
 MAP #2008-151 - DB 2271 PG 860
 BARBECUE TOWNSHIP
 HARNETT COUNTY - NORTH CAROLINA
 SCALE 1 = 40 FEB 15 2011
 PIN #9597-51-3036 000



BENTON DEWAR & ASSOCIATES
 PROFESSIONAL LAND SURVEYOR
 5920 HONEYCUTT ROAD
 HOLLY SPRINGS NC 27540
 (919)-552-9813

I BENTON W DEWAR CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION THAT THE RATIO OF PRECISION IS 1 NA THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK MAP 2008 PAGE 151 THAT THIS PLAT DOES NOT MEET SIZE REQUIREMENTS FOR RECORDING IN THE REGISTER OF DEEDS PER G.S. 47-30 AS AMENDED LICENCE NUMBER AND SEAL THIS 15th DAY OF FEB 2011

[Signature]
 PROFESSIONAL LAND SURVEYOR L-3040

THIS PLAT IS OF A BOUNDARY SURVEY OF AN EXISTING PARCEL OF LAND THAT IS REGULATED BY A COUNTY OR MUNICIPALITY ORDINANCE THAT REGULATES PARCELS OF LAND

NAME STANCIU BUILDERS, INC

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

II 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

Ornenda Saldaña VP
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

3-27-12
DATE