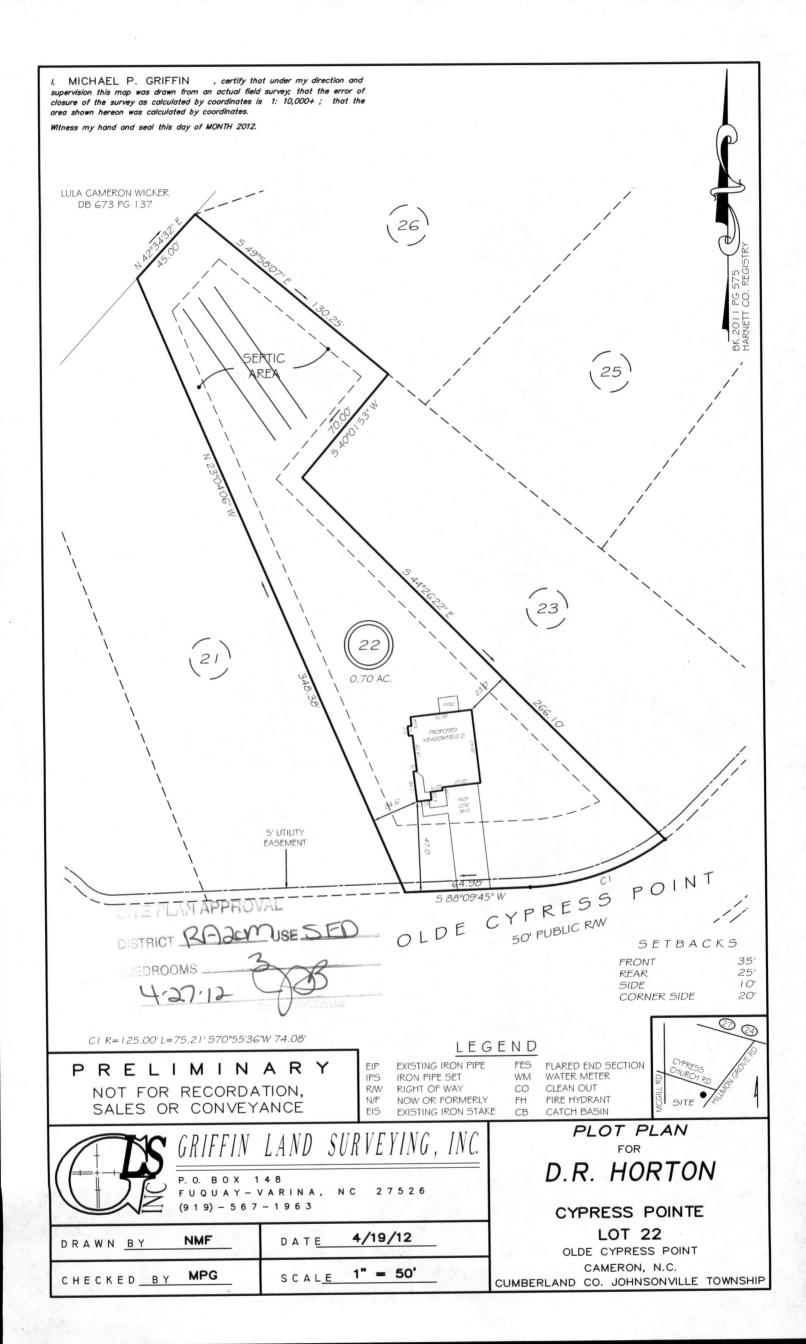
Initial Application Date: 973517	
	Application # 1250028791
	OF HARNETT RESIDENTIAL LAND USE APPLICATION on, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/com/to-
"A RECORDED SURVEY MAP, RECORDED DEED (C	R OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: D.R. WOLTON JAC	A COOR OF THE PERSON ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
1/ /-	Mailing Address: C///////////////////////////////////
State: 100	Zip: D) Yelcontact No: 9/94/60-2933 nail: Marguy ed. Aut
APPLICANT: (20me as a	La Maithe Address:
City:State:	Zip: Contact No: Email:
CONTACT NAME APPLYING IN OFFICE: B	yan hadand and
PROPERTY LOCATION: Subdivision:	ress Pour R
State Road # 110 - State Road Name:	d Intte
Parcel: 09 9544 0024	Map Book & Page: 20 (1575)
Zanina RA 26/Ahard Zana A Par	PIN: 9553-109-0056.000
*New structures with Decree 5	Deed Book & Page: 2960, 362-364 Power Company: Control Cleth
*New structures with Progress Energy as service provider	need to supply premise number from Progress Energy.
PROPOSED USE:	The state of the s
SFD: (Size 32 x 8) # Redromas # 5 u 2	5
(Is the bonus room finished)	Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Sla
	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 Home: SW DW TW/Size	, , , , , , , , , , , , , , , , , , ,
	x) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit
☐ Home Occupation: # Rooms:Use:	#Employees:
☐ Addition/Accessory/Other: (Sizex) Use:_	Closets in addition? () yes () no
	Closets in addition? () yes () no
Water Supply: County Existing Well	New Well (# of dwellings using well) *Must have operable water before final
The complete check	(St) Existing Sentic Tank (Complete Charting)
boos owner of this tract of land, own land that contains a m	anufactured home within five hundred feet (500) of teach till
the state of the s	or overhead () ves 4 Ves
Structures (existing of proposed): Single family dwellings:	Manufactured Homes: Other (specify):
	Other (specify):
Required Residential Property Line Setbacks:	Comments:
Front Minimum 3 Actual	
Rear <u>25</u>	
Closest Side 5	
Sidestreet/corner lot	
Nearest Building	
on same lot Residential Land Use Application	
	Page 1 of 2 PPLICATION CONTINUES ON BACK 03/11
	THE BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
Highway 210-5 to Spring Lake Light on Quebils	
Road - Subdivision on walt after law & intersection	
0 1 0	
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 Date	1.

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



1 "	0011	2/						
NAME:	14-11	orton	Inc		APPLICATION #:			
	*	This applicat	ion to be fill	ed out when applying	for a septic system inspection.*			
Cour	County Health Department Application for Improvement Permit and/or Authorization to Construct							
PERMIT (DR AUTHORIZATION IN	THIS APPLICATION TO CONS	ATION IS FAI STRUCT SHA	LSIFIED, CHANGED, O LL BECOME INVALID	OR THE SITE IS ALTERED, THEN THE IMPROVEMENT The permit is valid for either 60 months or without expiration			
depending	upon documentati	on submitted. (Complete site	plan = 60 months; Compl	lete plat = without expiration)			
	910-893-7525 c		-4'- O4	-O-d- 000	CONFIRMATION #			
Envi	ironmental Hea	ons must be	made vis	i C ode 800 ible Place "nink pro	operty flags" on each corner iron of lot. All property			
ı	ines must be cl	early flagged	approximat	tely every 50 feet bet	ween corners.			
•	Place "orange h	ge house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,						
• 1	out buildings, si	gs, 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 soil 							
	evaluation to be	e performed.	Inspectors :	should be able to wa	Ik 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. 								
• 7	After preparing	proposed site	call the vo	ice permitting system	n at 910-893-7525 option 1 to schedule and use code			
	300 (after selec	ting notificati	on permit if	multiple permits exis	st) for Environmental Health inspection. Please note			
				ording for proof of red				
				ections Code 800	eed to Central Permitting for permits.			
•	Follow above in	structions for	placing flag	s and card on prope	erty.			
•	Prepare for ins	pection by re	moving soil	over outlet end of	tank as diagram indicates, and lift lid straight up (if			
• 3	<i>possible</i>) and tr	nen put IIa ba L IDS OFF OF	SEPTIC TAI	. (Unless inspection	is for a septic tank in a mobile home park)			
• /	After uncovering	g outlet end	call the voice	ce permitting system	at 910-893-7525 option 1 & select notification permit			
					Health inspection. Please note confirmation number			
• [lse Click2Gov	or IVR to hea	proof of rec	<u>juest</u> . nce approved proce	ed to Central Permitting for remaining permits.			
SEPTIC								
					: can be ranked in order of preference, must choose one.			
,,	cepted	{}} Innovat		{ ∠ } Conventional	{}} Any			
	ternative	{}} Other _						
The appli	cant shall notify	the local healt	h department	upon submittal of this	application if any of the following apply to the property in			
question.	If the answer is	"yes", applica	nt MUST A	TTACH SUPPORTIN	NG DOCUMENTATION:			
{}}YES	(_) NO	Does the site	contain any l	Jurisdictional Wetlands	s?			
{_}}YES		Do you plan t	o have an <u>irr</u>	igation system now or	in the future?			
{}}YES		Does or will t	he building o	contain any drains? Ple	ase explain			
{}}YES	{} NO				or Wastewater Systems on this property?			
{}}YES		Is any wastev	vater going to	be generated on the si	ite other than domestic sewage?			
{}}YES	,	Is the site sub	ject to appro	val by any other Public	c Agency?			
{_}}YES		Are there any	Easements of	or Right of Ways on thi	is property?			
{}}YES	(NO	Does the site	contain any	existing water, cable, p	phone or underground electric lines?			
		If yes please	call No Cuts	at 800-632-4949 to lo	cate the lines. This is a free service.			
I Have Re	ad This Applicati	ion And Certify	That The In	formation Provided Her	rein Is True, Complete And Correct. Authorized County And			
State Offi	cials Are Granted	Right Of Entr	y To Conduc	t Necessary Inspections	To Determine Compliance With Applicable Laws And Rules.			
I Understa	and That I Am So	olely Responsib	le For The Pr	oper 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)

10/10