

Initial Application Date: 4-30-12

Application # 1250028833

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: TOM Developer Mailing Address: 466 stancil Rd
City: Amherst State: NC Zip: 27501 Contact No: 427-8266 Email: _____

APPLICANT: Stancil Builders Mailing Address: 466 stancil Rd
City: Amherst State: NC Zip: 27501 Contact No: 427-8266 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Feddy Strickland Phone # 919-427-8266

PROPERTY LOCATION: Subdivision: Hadden point Lot #: 4 Lot Size: 0.459
State Road # 1437 State Road Name: Ballinal Rd Map Book & Page: 2010/379#380
Parcel: 080652-0024-09 PIN: 0652-45-4434.000
Zoning: R20M Flood Zone: X Watershed: TL Deed Book & Page: 2359, 530 Power Company*: _____

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

PROPOSED USE:

- SFD: (Size 52x51) # Bedrooms: 3 # Baths: 2 Basement(w/w 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/w 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>39</u>
Rear		<u>25</u>		<u>123</u>
Closest Side		<u>10</u>		<u>24</u>
Sidestreet/corner lot		<u>20</u>		
Nearest Building on same lot				

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

TAKE 210 toward ~~Vinick~~ turn Left on
Harnett central Then Left on BALLARD Rd sub on
Right

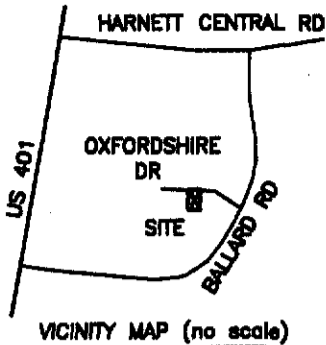
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work, and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information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

Brenda Redden V.P.
Signature of Owner or Owner's Agent

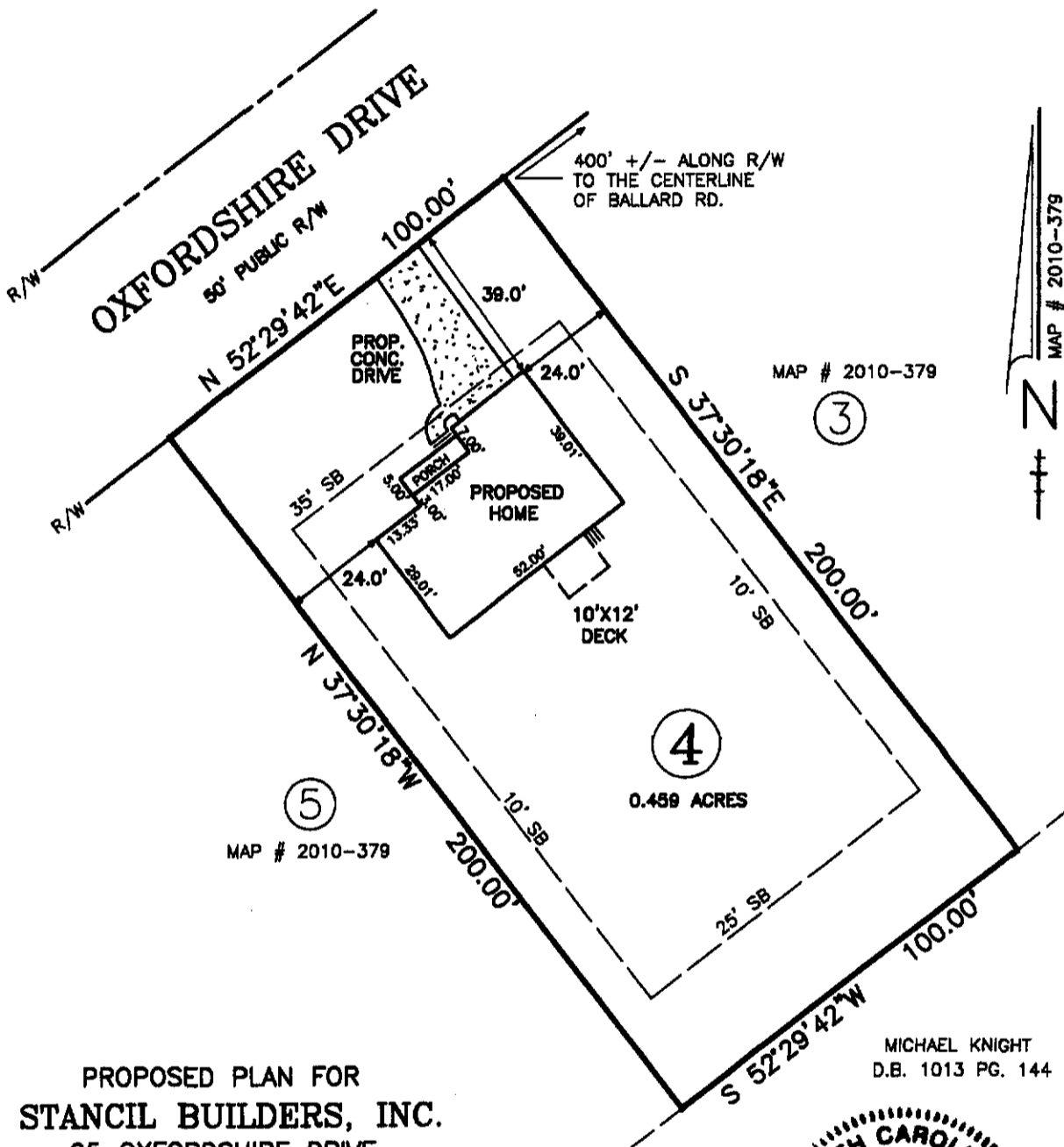
4-9-12
Date

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



NOTES / LEGEND
 AREA BY COORDINATES.
 THIS LOT IS NOT LOCATED IN A FEMA MAPPED
 FLOOD HAZARD AREA. FEMA MAP # 3720084200J;
 ZONE X; EFF. DATE 10/3/2008.
 SB - SETBACK
 R/W - RIGHT OF WAY



PROPOSED PLAN FOR
STANCIL BUILDERS, INC.
 95 OXFORDSHIRE DRIVE
 LOT 4 HADDEN POINTE PHASE I
 MAP # 2010 - 379 & 380
 PIN # 0652-45-4434.000
 HECTOR'S CREEK TOWNSHIP
 HARNETT COUNTY - NORTH CAROLINA
 SCALE : 1" = 40' - APRIL 23, 2012

MICHAEL KNIGHT
 D.B. 1013 PG. 144



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: N/A THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK MAP 2010 PAGE 379, 380; 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 23RD DAY OF APRIL 2012

Benton W. Dewar
 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: Stancil Builder 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

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 _____

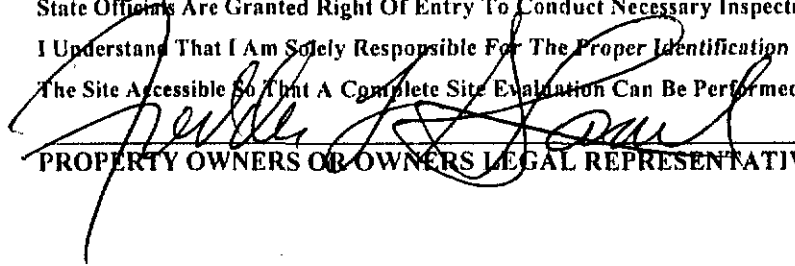
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- 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)

4-27-12
DATE