OWNER NAME: Comfort Homes Inc. APPLICATION #: _____

This application to be filled out only when applying for a new septic system.

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)

DEVELOPMENT INFORMATION

- [X] New single family residence
- [ ] Expansion of existing system
- [ ] Repair to malfunctioning sewage disposal system
- [ ] Non-residential type of structure

WATER SUPPLY

- [ ] New well
- [ ] Existing well
- [ ] Community well
- [X] Public water
- [ ] Spring

Are there any existing wells, springs, or existing waterlines on this property?

{__} yes {__} no {__} unknown

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

{__} Alternative {__} Other _____

{X} Conventional {__} Any

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 {X} NO Does the site contain any existing Wastewater Systems?

{__}YES {X} NO Is any wastewater going to be generated on the site other than domestic sewage?

{__}YES {X} 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 {X} 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.

Shawn Battles 10-17-12

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) **DATE**

Initial Application Date: 10-18-12

SCANNED

DATE

Application # 12500 29938

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

App ~~LANDOWNER~~: Comfort Homes Inc. Mailing Address: P.O. Box 369

City: Clayton State: NC Zip: 27528 Contact No: 919-553-3242 Email: Comfrthomes@aol.com

landowner ~~APPLICANT~~: Richard Stell Mailing Address: 200 N Main St

City: Fuquay State: NC Zip: 27526 Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Sherman Butten Phone # 919-553-3242

PROPERTY LOCATION: Subdivision: Meredith's Station Lot #: 2 Lot Size: 0.584 AC.

State Road # 1441 State Road Name: Chalybeate Springs Rd. Map Book & Page: 2012 1297

Parcel: 080654013901 PIN: 0654-61-9669

Zoning: RA30 Flood Zone: X Watershed: III Deed Book & Page: OTP, Power Company*: Progress

*New structures with Progress Energy as service provider need to supply premise number 72150387 from Progress Energy.

PROPOSED USE:

(Included)

X SFD: (Size 48' x 53') # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): ____ Garage: ~~yes~~ Deck: ~~yes~~ Crawl Space: X 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/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: X County ____ Existing Well ____ New Well (*# of dwellings using well* _____) ***Must have operable water before final**

Sewage Supply: X 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 (X) no

Does the property contain any easements whether underground or overhead (__) yes (X) no

Structures (existing or proposed): Single family dwellings: 1 Manufactured Homes:_____ Other (specify):_____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front		40'
Rear		125'
Closest Side		41'
Sidestreet/corner lot		N/A
Nearest Building on same lot		N/A

Comments:_____

APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: US 401 N. Right on Chalybeate Springs Rd. Left on Meredith Lane

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.

Shum Bitter
Signature of Owner or Owner's Agent

10-17-12
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

SR 1415

NOTE: THIS PROPERTY IS SUBJECT TO EASEMENTS AND RESTRICTIONS OF RECORD.

PRELIMINARY PLAT– NOT FOR RECORDATION, CONVEYANCES, OR SALES.

IMPERVIOUS SURFACE COVERAGE
1825 SQ.FT. – HOUSE, PORCH & GARAGE
850 SQ.FT. – WALK & DRIVEWAY
2675 TOTAL SQ.FT. – PROPOSED COVERAGE
PERCENTAGE OF LOT COVERED -10.5 %

Curve	Radius	Length	Chord	Chord Bear.
C1	285.00'	189.13'	185.68'	S 86°00'15" E

PLAT NORTH
PLAT CAB. F SLIDE 170–B

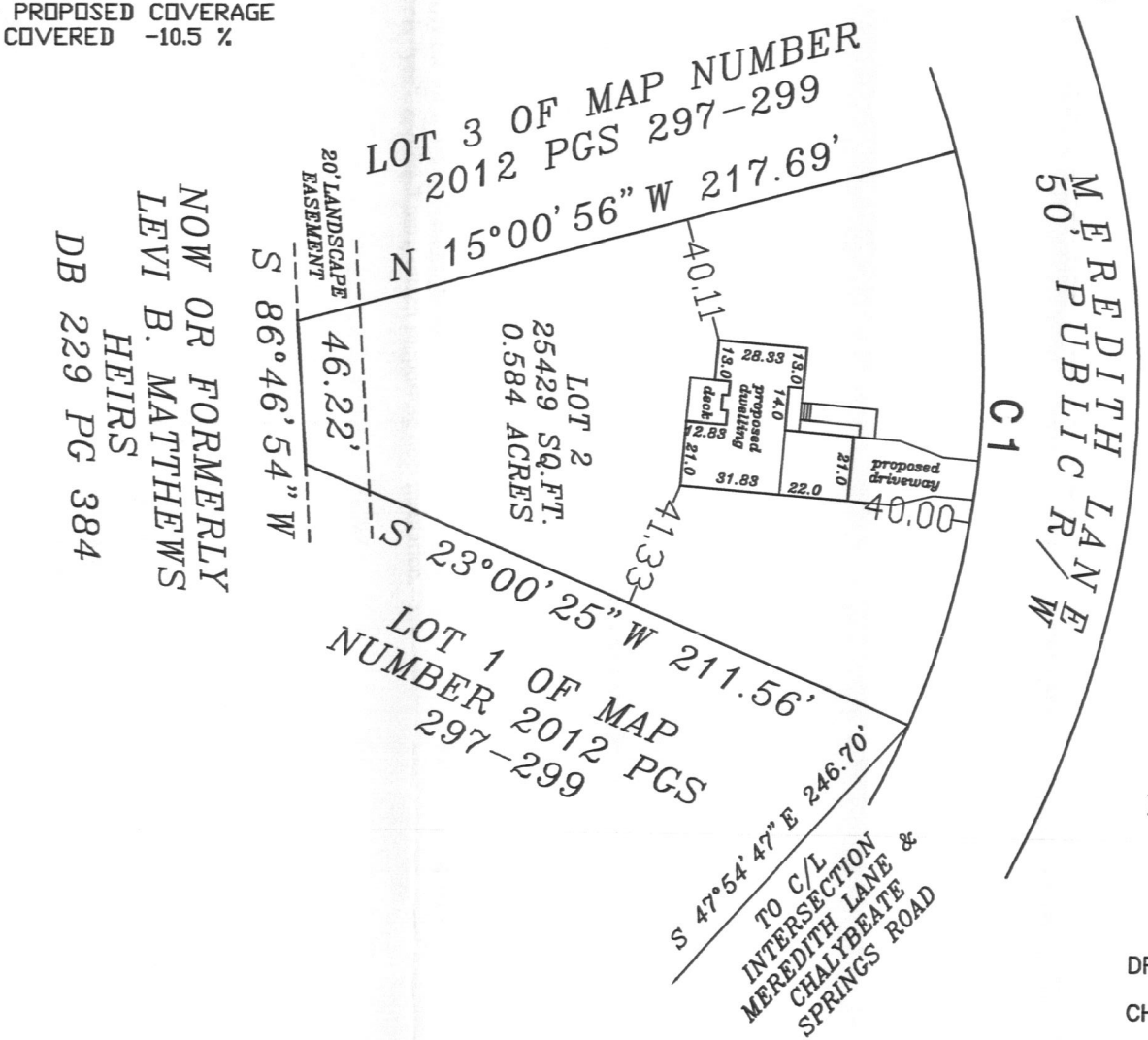
ITE
REYSON
TERS WAY

AP

OF MEREDITH'S STATION,
K 2012, PAGES 297-299.

ID BY COORDINATE METHOD.

IT WITHIN 2000' HAVE



that this map was drawn under my supervision;
rveyed are indicated as drawn from
12 Pages 297-298,that the ratio of precision
'000; and that this map meets the
rds of Practice for Land Surveying in North

012

NORTH CAROLINA PROFESSIONAL SEAL L-2647 LAND SURVEYOR DANNY O. WILLIAMS

Professional Land Surveyor
L-2647

SURVEY. INFORMATION TAKEN FROM MAP NUMBER

RCE & ASSOC., P.A.

05

60 0 60 120 180
GRAPHIC SCALE – FEET

PLAN "BENTONVILLE"
OVERALL 48.0 X 53.83

PLOT PLAN FOR
COMFORT HOMES
HECTOR'S CREEK TOWNSHIP
HARNETT COUNTY
NORTH CAROLINA

DRAWN BY: DOW & BGW
CHECKED BY: DOW
DATE: 10-03-2012
SCALE: 1" = 60'
JOB: MERED CF
FB:

Comfort Homes, Inc.

P.O. Box 369 Clayton, NC 27520
919-553-3242

October 9, 2012

Comfort Homes, Inc. has an option to purchase Lots 2 & 12, in Meredith's Station Subdivision, recorded in Map Book 2012, Page 297, Harnett County Register of Deeds.

_____(Seal)

I, Patricia F. Waite, do hereby certify that Julian R. Stewart, President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 9th day of October 2012.

_____(Notary Public)

My commission expires 4/2/17.

PATRICIA F. WAITE
NOTARY
PUBLIC
JOHNSTON COUNTY, NC