Initial Application Date:_	1-	. 2	_ /	3

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Application # _	10		0	201	_//

Initial Application Date: 4 5 5 00 300 /
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**
LANDOWMER: Greegory INE Mailing Address: 62 E Melvy St
City: The State: Mc Zip: 27501 Contact No: 9/9422 2251 Email: gregoryine anna @90
APPLICANT: DONALD Gregory Mailing Address: Same
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: DOLAN Gragon Phone # 9/9 4/22 225/
PROPERTY LOCATION: Subdivision: Lot Size:
State Road # 1403 State Road Name: Kyp/rig Gd Map Book & Page: Map Book & Page: Parcel: 18 0652 0049 PIN: 1643-13-5300-000
Zoning: RADO Flood Zone: Watershed: Deed Book & Page: 30991 3 de Power Company*: Progress Energy
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
□ SFD: (Size 25 x 60) # 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: (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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:

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

Residential Land Use Application

☐ Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_

\_\_\_\_ Manufactured Homes:\_\_\_\_\_ Other (specify):\_\_\_\_\_ Structures (existing or proposed): Single family dwellings:\_\_\_\_

Required Residential Property Line Setbacks: ear

losest Side

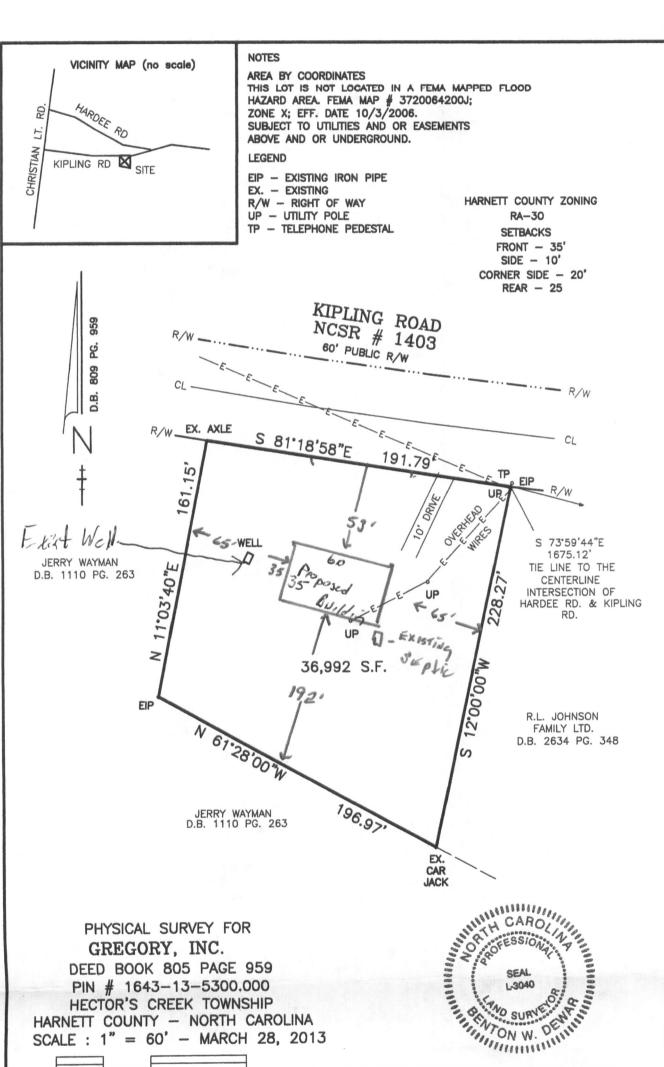
idestreet/corner lot\_ earest Building

> Page 1 of 2 **APPLICATION CONTINUES ON BACK**

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provided to the stage of the stage				
	conform to all ordinance	s and laws of the State of North	Carolina regulating such work and the	specifications of plans sub
nits are granted agree to				
nits are granted ragree to by state that foregoing sta	tements are accurate and	d correct to the best of my knowledge	edge. Fermit subject to revocation in	area information to provided

\*\*\*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\*\*



	APPLICATION #:
NAME: The	
	*This application to be filled out when applying for a septic system inspection.*
	Department Application for Improvement Permit and/or Authorization to Construct N IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
DEDIKIT OF ALITHOPI	ZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either to months of without expiration
depending upon docume	ntation submitted. (Complete site plan = 60 months; Complete plat = without explication)
910-893-752	Health New Sentic SystemCode 800
All property	virons must be made visible. Place "pink property flags" on each corner iron of lot. All proper
linea much h	e clearly flagged approximately every 50 feet between corners.  Je house corner flags" at each corner of the proposed structure. Also flag driveways, garages, deck
aut buildings	evinaming pools etc. Place flags per site plan developed allof Certiful Fermitting.
Diana arange	Environmental Health card in location that is easily viewed from rodu to assist in locating property.
16 manager in	thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the so be performed. Inspectors should be able to walk freely around site. <b>Do not grade property</b> .
All late to b	a addressed within 10 husiness days after confirmation. \$25.00 feturn trip lee may be incurre
for falling to	tipopyor quelot lid mark house corners and property lines, etc. once lot confirmed ready.
A (1	ng proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use cod lecting notification permit if multiple permits exist) for Environmental Health inspection. <u>Please not</u>
firmation	number given at end of recording for proof of request.
<ul> <li>Use Click2Go</li> </ul>	ov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
Four conmental I	Health Existing Tank Inspections Code 800
Dunnara for i	instructions for placing flags and card on property.  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 nome park)
DO NOT LEAV	/E LIDS OFF OF SEPTIC TANK
After uncover     if multiple pe	rmits, then use code 800 for Environmental Health inspection. Please note confirmation number
airon at and	of recording for proof of request.
	ov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
SEPTIC If applying for authoriza	tion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
Accepted	{} Innovative {} Conventional {} Any
{} Alternative	{}} Other
m licent shall notif	y the local health department upon submittal of this application if any of the following apply to the property in 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?
	Does or will the building contain any drains? Please explain
	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
(	Is any wastewater going to be generated on the site other than domestic sewage?
(	Is the site subject to approval by any other Public Agency?
	Are there any Easements or Right of Ways on this property?
(	Does the site contain any existing water, cable, phone or underground electric lines?
{_}}YES {} NO	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.
	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
I Have Read This Applicat	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
State Officials Are Grantee	I Right Of Entry To Conduct Necessary Inspections To Determine Computer Visit Applicable Edward Making
	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
The Site Accessible So Tha	A Complete Site Evaluation Can Be Performed.
Nay/Nh	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE
PROPERTY OWNERS	OK OWNERS LEGAL REPRESENTATIVE SIGNATURE (122 2 122)