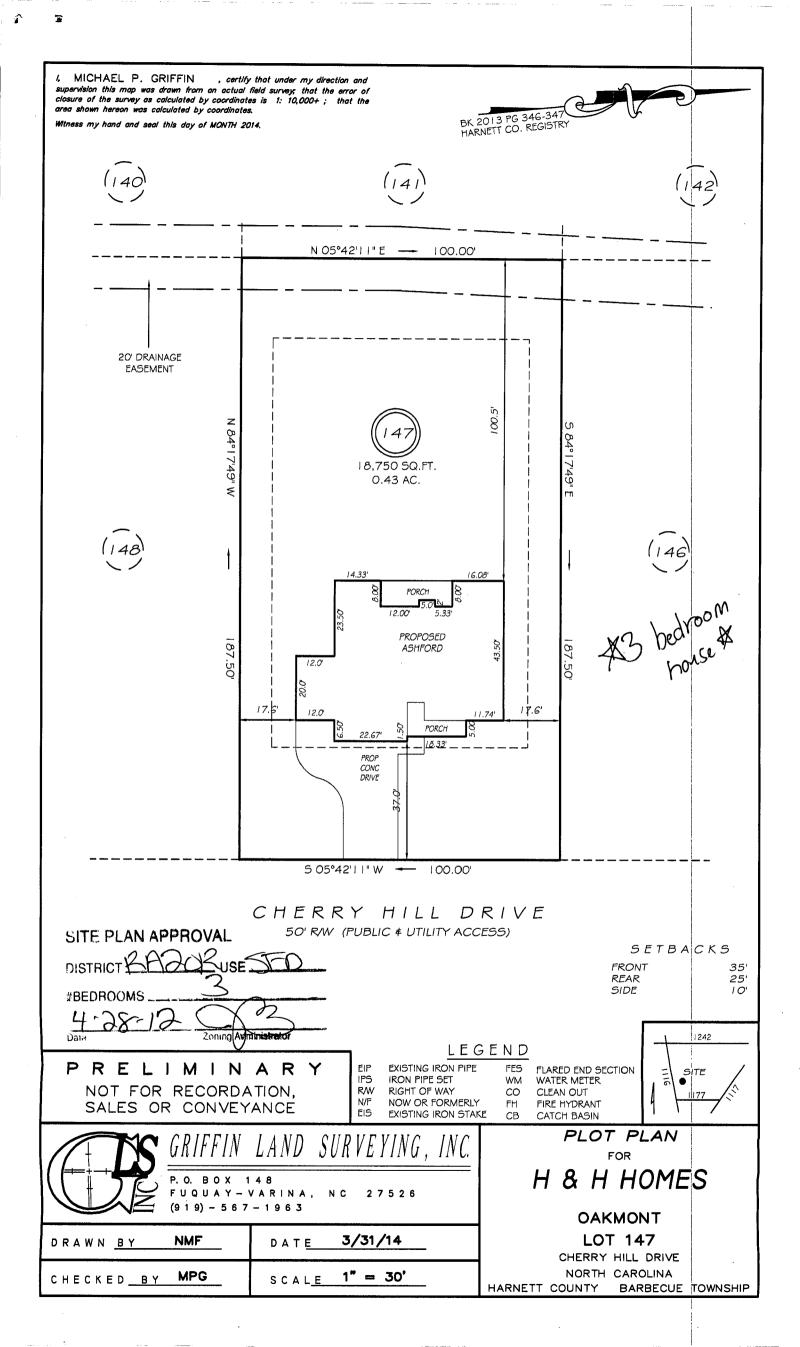
Initial Application Date: 4-28-14	Application # 1450033513
COUNTY OF HARNETT RESIDENTIAL LAND USE Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 6	CU#E APPLICATION ext:2 Fax: (910) 893-2793 www.harnett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE RE	EQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: H&H Constructors, Inc. Mailing Address: 2919	Breezewood Avenue, Ste. 400
City: Fayetteville State: NC Zip: 28303 Contact No: 910-486-486	84 Email: meaganbradshaw@hhhomes.c
APPLICANT*: H&H Constructors, Inc. Mailing Address: 2919 Breezewood	
City: Fayetteville State: NC Zip: 28303 Contact No: 910-486-486	4 meaganbradshaw@hhhomes.c
*Please fill out applicant information if different than landowner	Email:
CONTACT NAME APPLYING IN OFFICE: Meagan Bradshaw	Phone # 910-486-4864
PROPERTY LOCATION: Subdivision: Oakmont	Lot# 147 Lot Size: .43acres
State Road # 1116 State Road Name: Docs Road	Map Book & Page: 2013/346
	32-4876
Zoning: RA-20R Flood Zone: X Watershed: NA Deed Book & Page: 3190, C	Central Elec.
*New structures with Progress Energy as service provider need to supply premise number	from Progress Energy.
PROPOSED USE: Deep Side	
SFD: (Size 50 x 165) # Bedrooms: 3 # Baths: 3 Basement(w/wo bath): WA Garage:	Monolithic Monolithic
(Is the bonus room finished? () yes () no w/ a closet? () yes	
☐ Mod: (Size x) # Bedrooms # Baths Basement (w/wo hath) Garage	
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage:_ (Is the second floor finished? () yes () no Any other site built	
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Gara	age:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
☐ Home Occupation: # Rooms: Use: Hours of Operation	on:#Employees:
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
Nater 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)	lete Checklist) County Sewer
Does owner of this tract of land, own land that contains a manufactured home within five hundred fe	et (500') of tract listed above? () yes (✔) no
Does the property contain any easements whether underground or overhead (Y) yes (_) no	
Structures (existing or proposed) Single family dwellings: Proposed Manufactured Homes:	Other (specify):
Required Residential Property Line Setbacks: Comments:	
ront Minimum 35 Actual 37	
Rear <u>25</u> <u>N/A</u>	
Closest Side 5/10 17.10	
Sidestreet/corner lot 20 N/A	
learest Building	
Residential Land Use Application Page 1 of 2 APPLICATION CONTINUES ON BAGE	03/1 CK

subdivision.
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 submit 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

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



NAME: 1+4	# Constructors APPLICATION #:	•			
	This application to be filled out when applying for a septic system inspection.				
County Hea		at.			
PERMIT OR AUTH depending upon doc 910-893	HORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration submitted. (Complete site plan = 60 months; Complete plat = without expiration) 3-7525 option 1	<u>Ct</u> T ation			
	ntal Health New Septic SystemCode 800				
lines mus	perty irons must be made visible. Place "pink property flags" on each corner iron of lot. All projects be clearly flagged approximately every 50 feet between corners.	perty			
Place "or	orange house corner flags" at each corner of the proposed structure. Also flag discourses				
	"" 99) 9 miniming pools, city. I latte lians her sile high appropriate Control Degree in				
1 lace ula	range Environmental Health card in location that is easily viewed from road to assist in locating proper rty is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the onto be performed. Inspectors should be able to sell a transfer out the undergrowth to allow the	ty.			
o i di dali o	on to be performed. Inspectors should be able to walk tradity around site. To not and a number to				
<u> </u>	to be audiessed willing to business days after confirmation. each on water a first transition in	rred			
.o. ranar	eparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use of selecting notification permitting the mark in the schedule and use of selecting notification permitting the mark in the schedule and use of selecting notification permit if multiple and use of selecting notification permit is a selecting notification permit if multiple and use of selecting notification permit is a selecting notification permit if multiple and use of selecting notification permit is a selecting notification permit if multiple and use of selecting notification permit is a selecting notification permit is a selecting notification permit in the selecting notification is a selecting notification permit in the selecting notification is a selecting notification in the selecting notification				
confirmat	stracting notification permit if multiple permits exist) for Environmental Health inspection. Please	ode note			
 Use Click 	k2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits				
• Follow ab	tal Health Existing Tank Inspections Code 800 bove instructions for placing flags and card on property.				
Prepare t	for inspection by removing soil over outlet end of tank as diagram indicaton, and lift lid attained to	n (if			
possible) and then put lid back in place . (Unless inspection is for a septic tank in a mobile home park) LEAVE LIDS OFF OF SEPTIC TANK	Γ (
 After unce 	covering outlet end call the voice permitting system at 910-893-7525 option 1.8 soloct potition to	rmit			
ii muliipie	e permits, then use code 800 for Environmental Health inspection. Please note confirmation num	<u>ıber</u>			
 Use Click 	end of recording for proof of request. k2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.				
SEFFIC					
	norization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
{}} Accepted	{}} Innovative {}} Conventional {}} Any				
{}} Alternative					
The applicant shall a question. If the answ	notify the local health department upon submittal of this application if any of the following apply to the propert swer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	y in			
{_}}YES { <u>X</u> } N	NO Does the site contain any Jurisdictional Wetlands?				
{_}}YES { ∠ }} N	NO Do you plan to have an <u>irrigation system</u> now or in the future?				
{_}}YES { <u>X</u> } N	NO Does or will the building contain any <u>drains</u> ? Please explain				
()YES {\(\sum_{\chi} \)} N	NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{_}}YES {\(\)_\} N	· - ·				
{_}}YES {\pmi} No					
{\(\sum_{\} \) YES \(_{\} \) NO	NO Are there any Easements or Right of Ways on this property?				
{_}}YES {_£} No					
	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.				
I Have Read This App	oplication And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County A	Ind			
State Officials Are Gr	Franted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rul	les.			
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	So That A Complete Site Evaluation Can Be Performed.				
	anna Man 4/4/14	_			
I NOTEKI I UWN	NERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE	-			

Harnett County 102 EAST FRONT ST P O BOX 65 LILLINGTON NC 27546

DATE: 4/28/14 TIME: 10:46:05

APPLICATION NBR: 14-50033513 LOCATION ADDR: 91749 TECH 2 REFERENCE: NEW TANK

PAID ITEM DESCRIPTION ______ SOIL EVAL/NEW SEPTIC TANK 750.00 TOTAL AMOUNT PAID: 750.00

RECEIPT #: 0000010656

CASHIER: JBROCK

PAYMENT TYPE: ESCROW

Plan Box #	AA9	Date Job Na	7-31-15 me_H & H		
App # 33	513	Valuation 2208	ion 220 800 Heated SQ Feet 23		
Inspections for	SFD/SFA		Garage =		
Crawl	Slab	Mono	Basement		
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Mono Slab Rough In Insulation Final	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough In Insulation Final		
Foundation Survey	y E	invir. Health	Other		
*************	**********		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Additions / Other					
ooting oundation					
ab ono					
en Floor ugh In					
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