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Initial Application Date:	5-	20	_1	•

Nearest Building on same lot

Residential Land Use Application

	14	,-		22	700
Application #_	17	5	00	50	100

nitlal Application Date: 5 2 Application # 4 5 5 5 5 7 5 5 7 5 7 5 7 5 7 5 7 5 7 5
CU#CU#CU#
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
ANDOWNER: Jennifer Thomas Patterson Mailing Address: 1858 Mc Athur Rd
City: 13 yo ad way State: NC Zip: 27505 Contact No: Email:
APPLICANT*: Mailing Address:
City: State:Zip: Contact No: Email:
Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Phone #
PROPERTY LOCATION: Subdivision: Lot Size; 1.01 Qt Ye
State Road # 1280 State Road Name: MLAVYhuv Road Map Book & Page: 2012, 397
Parcel: 130509-0079 02 PIN: 9690-04-5531.000
Coning: RA 20 Flood Zone: Watershed: WA Deed Book & Page: 3214/515 Power Company*:
New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE:  Monolithic
SFD: (Size 57 x 40) # Bedrooms: 4 # 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 Bullt 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:
Home Occupation: # Rooms: Use: Hours of Operation: #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) 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: Comments:
Front Minimum 35 Actual 60
Rear <u>25 /80</u>
Closest Side 15 38
Sidestreet/corner lot

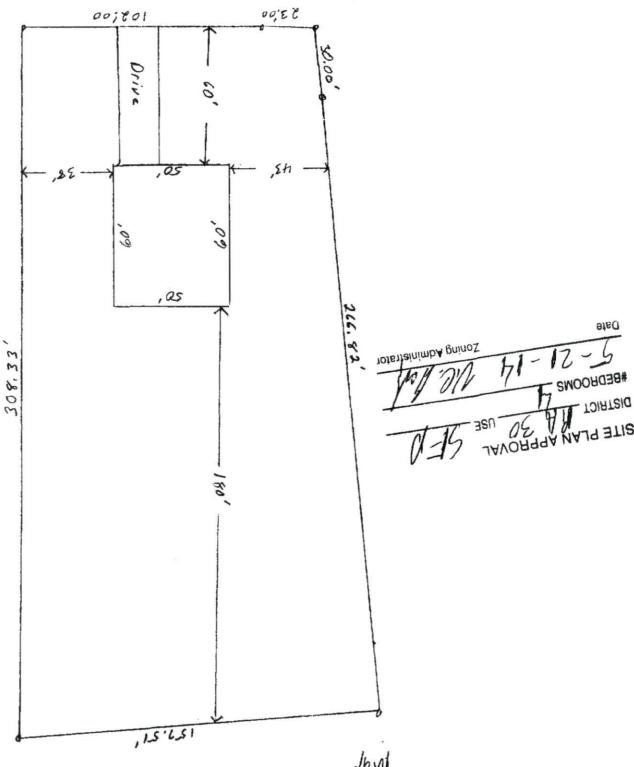
Page 1 of 2 Rec & 5/22/14
APPLICATION CONTINUES ON BACK

03/115/20/14

SDECIEIC DIDECTIONS TO	O THE PROPERTY FROM LILLING	GTON: Take 40	UN to	McArth	urko
Take	luft on m	rearthur.	Jobis		
th.	e Fight,				_
				d. and the annuitine of along	a automitted
If permits are granted I agre I hereby state that foregoing	ee to conform to all ordinances and g statements are accurate and corre	ect to the best of my knowledge	e. Permit subject to revo	cation if false information is pro	vided.
	Signature of Owner or Own	er's Agent	Date	14	
If permits are granted I agre I hereby state that foregoing	Sh Shuro	ect to the best of my knowledge	e. Permit subject to revo	k and the specifications of plan cation if false information is pro	s submi

\*\*\*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\*\*



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NAME:
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County Health Department Application for improvement Fer intransformation and research to Construct the Information in this application is falsified, changed, or the site is altered, then the improvement if the information in this application is falsified, changed, or the site is valid for either 60 months or without expiration permit or authorization to construct shall become invalid. The permit is valid for either 60 months or without expiration
PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME IN A Manual Property of the Permitted (Complete site plan = 60 months; Complete plat = without expiration)
910-893-7525 option 1
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 irons must be made visible. Place "pink property flags" on each corner iron of lot. All property irons must be made visible.
All property irons must be made visible. Place plant property irons must be clearly flagged approximately every 50 feet between corners.  Ines must be clearly flagged approximately every 50 feet between corners.  Also flag driveways, garages, decks.
lines must be clearly flagged approximately every 50 feet between corners.  lines must be clearly flagged approximately every 50 feet between corners. Also flag driveways, garages, decks every flagge for the proposed structure. Also flag driveways, garages, decks every flagge flagger flagger developed structure.
out buildings, swimming pools, etc. Place riags per site plant or property, in the plant of the
Place orange Environmental Health card in location that is easily viewed in the undergrowth to allow the so if property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the so
evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property.
<ul> <li>All lots to be addressed within 10 business days are and properly lines, etc. once lot confirmed ready.</li> </ul>
for failure to uncover outlet lid, mark house corners and property lines, etc. by sometimes the sold of the volce permitting system at 910-893-7525 option 1 to schedule and use code.  After preparing proposed site call the volce permitting system at 910-893-7525 option 1 to schedule and use code.
and letter animating natification normit if multiple Dellints Calot,
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 Upsith Evicting Tenk Inspections Code OUV
<ul> <li>Follow above instructions for placing flags and card on property.</li> <li>Follow above instructions for placing flags and card on property.</li> </ul>
<ul> <li>Follow above instructions for placing flags and card on property.</li> <li>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)</li> </ul>
DO NOT LEAVE LIDS OFF OF SEPTIC TANK
<ul> <li>DO NOT LEAVE LIDS OFF OF SEPTIC TANK</li> <li>After uncovering outlet end call the voice permitting system, at 910-893-7525 option 1 &amp; select notification permit if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number</li> </ul>
if multiple permits, then use code 800 for Environmental from
<ul> <li>use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.</li> </ul>
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 () Any
Alternative () Other
submitted of this application if any of the following apply to the property in
The applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall notify the local health department upon submittal of this applicant shall not
(_)YES (\(\Lambda\)) NO Does the site contain any Jurisdictional Wetlands?
YES (I) NO Do you plan to have an irrigation system now or in the future?
VPS (X) NO Does or will the building contain any drains? Please explain.
Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
YES [1] NO Is any wastewater going to be generated on the site other than domestic sewage?
_]YES [4] NO Is the site subject to approval by any other Public Agency?
_)YES [4] 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.
Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
OST date Are Granted Right Of Fatry To Conduct Necessary Inspections To Determine Compliance with Applicable Laws And Rules.
Inderstand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines and Corners and Making
A. D. Naufannad
2 -0 -0 -0
OPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE