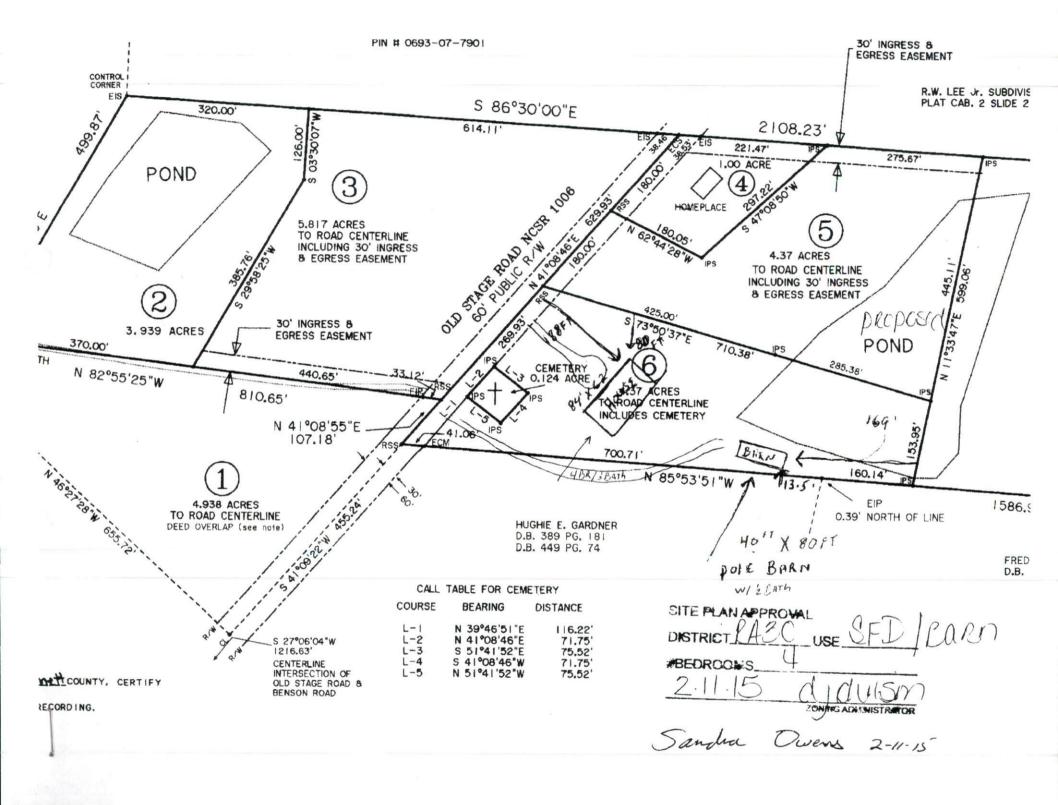
	The state of the s
•	minaristale 20 of ortore
	Initial Application Date: 2.11.15  Power of the property of th
	COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext.2 Fax: (910) 893-2793 www.harnett.org/permits
	"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
6	LANDOWNER: Judith Byerly Mailing Address: 310 (1000) DR  City: STUUM an State: V Zip: FEB Contact No: Email:
Đ.	APPLICANT*: 5ANDRA OWEAS Mailing Address: 315 AXUM ROAD
P	City: Willow Soring State: NC Zip: 17591 Contact No: 919-880-8647 Email: Jollare Serve @ hot Mail: Com *Please fill out applicant information if different than landowner
	CONTACT NAME APPLYING IN OFFICE: Phone #
	PROPERTY LOCATION: Subdivision: MAUICU, Adams Lot #: 6 Lot Size: LL-DCAC
	State Road # 1000 State Road Name: 000 SHOW ROW Map Book & Page: 2000, 24
	Zoning H 2 Flood Zone: X Watershed: N 4 Deed Book & Page: Power Company*:
	*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
	PROPOSED USE: While dash hat to it to it is
	SFD: (Size 6 x 62) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: Slab: Slab: Slab: SSCUC
	Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
	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
	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): DC CC
	Required Residential Property Line Setbacks: Comments:
	Front Minimum 33 Actual 88
	Rear 20 100+
	Closest Side Sidestreet/corner lot
	on same lot  Residential Land Use Application  Page 1 of 2  APPLICATION CONTINUES ON BACK  APPLICATION CONTINUES ON BACK  O3/11
	Page 1 of 2 On 3/2/15 APPLICATION CONTINUES ON BACK  APPLICATION CONTINUES ON BACK  Denna Called - was not confirmed  Denna Called - was not confirmed
	- mail of the Nipkowall



Printed for location

## HARNETT COUNTY, NORTH CAROLINA GIS/LAND RECORDS FARIDGE RO PINEY GROVE RD AddressPoints Road Centerlines MajorRoads Rivers Parcels County Boundary CHARLIE SMITH LN CityLimits Harnett 2013.sid Red: Band 1 Green: Band\_2 Blue: Band 3 1000 ft Any use of this map shall be at the sole risk of the user of this map. Although, all effort has been taken to insure accuracy in the data presented, Harnett County makes no warranty, expressed or implied, as to the accuracy of this information represented herein. Any user of this product shall hold harmless Harnett County, its elected officials, employees and agents from and against any claim, damage, loss, action, cause of action, or liability arising from the use of this GIS product. Harnett County GIS 305 W Cornelius Harnett Blvd, Suite 100 Lillington NC 27546 Phone: 910-893-7523 www.harnett.or strong roots + new growth www.harnett.org

NAME	E:	•		APPLICAT	TION #: 5	500355		
	*This application to be filled out when applying for a septic system inspection.*							
Co	unty Health	Department Applica	tion for Improvemen	t Permit and/	or Authorizati	ion to Construct		
IL THE	INFORMATION	IN THIS APPLICATION IS	FALSIFIED CHANGED (	OR THE SITE IS AL	TEDED THEN TI	IE IMPROVENCENCE		
denendi	ng upon documen	ZATION TO CONSTRUCT Station submitted. (Complete	SHALL BECOME INVALII	D. The permit is vali	d for either 60 mon	ths or without expiration		
7	910-893-752	5 option 1	site plan = 60 months; Comp		TION #			
En En		Health New Septic Sys	temCode 800	CONTINUA	1101 #			
٧ .	All property	irons must be made	visible. Place "pink pre	operty flags" on	each corner iro	n of lot. All propert		
	mes must be	clearly riagged approxim	mately every 50 feet be	ween corners.				
•	Place "orange	e house corner flags" at	each corner of the prop	osed structure.	Also flag drivew	ays, garages, decks		
	Place orange	swimming pools, etc. F Environmental Health c	race flags per site plan	developed at/for	Central Permitt	ing.		
•	If property is	thickly wooded, Environ	mental Health requires	that you clean o	int the undergran	n locating property.		
	evaluation to	be performed. Inspecto	rs should be able to wa	lk freely around s	site Do not gra	de property		
•	All lots to be	addressed within 10 l	business days after co	onfirmation, \$25	5.00 return trin t	fee may be incurred		
	for failure to	uncover outlet lid, ma	rk house corners and	property lines.	etc. once lot co	onfirmed ready		
•	800 (after self	g proposed site call the	voice permitting system	n at 910-893-752	5 option 1 to sc	hedule and use code		
	confirmation n	ecting notification perminumber given at end of r	ecording for proof of re	si) ior Environme quest	antai Health insp	pection. Please note		
•	Use Click2Go	v or IVR to verify results	. Once approved, proc	eed to Central Pe	ermitting for per	mits		
En	<u>vironmental H</u>	lealth Existing Tank Ins	spections Code 800		g to pon	into.		
•	Follow above	instructions for placing f	lags and card on prope	rty.				
•	prepare for in	spection by removing s	soil over outlet end of	tank as diagram	indicates, and	lift lid straight up (i		
•	DO NOT LEAV	then put lid back in pla E LIDS OFF OF SEPTIC 1	TANK	is for a septic tar	nk in a mobile ho	ome park)		
•	After uncoveri	ng outlet end call the v	oice permitting system	at 910-893-7525	option 1 & sele	ect notification permi		
	if multiple per	mits, then use code 80	<b>00</b> for Environmental F	dealth inspection	. Please note of	confirmation number		
	given at end o	f recording for proof of r	equest.			2.0		
SEPTIC	Cose Click2GO	v or IVR to hear results.	Once approved, proces	ed to Central Per	mitting for remai	ining permits.		
		ion to construct please indic	eate desired system type(s):	can be ranked in o	order of preference.	must choose one.		
	ccepted	[_] Innovative	{≱ Conventional	{}} Any	•			
{}} Al		{}} Other	*					
The appl	icant shall notify	the local health departme	ent upon submittal of this	application if any o	of the following a	pply to the property in		
question.	If the answer is	s "yes", applicant MUST	ATTACH SUPPORTIN	G DOCUMENTA	ATION:			
{_}}YES	S {_} NO	Does the site contain any	y Jurisdictional Wetlands	UNK				
{_}}YES	S {_} NO	Do you plan to have an i	irrigation system now or i	n the future? JN	4			
{_}}YES	{_}} NO	Does or will the building	g contain any <u>drains</u> ? Plea	se explain. VNK		3153931111		
{}YES		Are there any existing w	ells, springs, waterlines o	r Wastewater Syste	ems on this prope	rty? UMIA		
\_}YES	( <u>Y</u> ) NO	Is any wastewater going	to be generated on the sit	e other than domes	stic sewage?			
{}}YES	0.000	Is the site subject to appr	roval by any other Public	Agency? UAK				
{}}YES			or Right of Ways on this	200 (5) (5)				
{}YES	{}} NO		existing water, cable, ph			UNK		
			ts at 800-632-4949 to loca					
		ion And Certify That The I						
		Right Of Entry To Condu						
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)  DATE								
PROPER	TY OWNERS	OR OWNERS LEGAL I	REPRESENTATIVE SI	GNATURE (REC	QUIRED)	DATE		