| nitial Application Date: | |
|--------------------------|--|
|--------------------------|--|

Residential Land Use Application

| | 155003584 | \neg |
|---------------|-----------|--------|
| Application # | 122002001 | |

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

| "A RECORDED SURVEY M | AP, RECORDED DEED (OR OFFER T KAHLU MOOC | O PURCHASE) & SITE PLAN ARE REQUIRE Mailing Address 382h | DWHEN SUBMITTING A LAND USE DATE TION |
|--|--|--|---|
| y Fuguey - Var | ing State 1/C Zip; 223 | 26 Contact No: 919-649-1886 | Alybeate Rd Email: KATHY. MODRE @ DUKE. |
| PPLICANT*: | Mailing | Address: | |
| ty: lease fill out applicant information If (| State:Zip: | Contact No: | Email: |
| ONTACT NAME APPLYING IN | OFFICE: | | Phone # |
| ROPERTY LOCATION: S atelist | 248 TV | TOPE PLO | Lot #:Lot Size: \$9,80 |
| ate Road # 1420 | State Road Name: Tud | or Rd | Map Book & Page: |
| rcet:050(024 00 | 66 01 | PIN: 0624-98- 7 | 4170-000 0634.07-58 |
| | | | Power Company*: |
| | | • | from Progress Energy. |
| ROPOSED USE: 7 SFD: (Size <u>54 x 33</u>)# | Bedrooms: 3 # Baths 2 F Base the bonus room finished? () yo | bernent(w/wo bath): Garage: [es () no w/ a closet? () yes (| Deck: Crawl Space: Slab: Slab:) no (if yes add in with # bedrooms) |
| (Is t | the second floor finished? () y | es () no Any other site built addit | Site Bullt Deck: On Frame Off Frame ions? () yes () no (site built?) Deck:(site built?) |
| | | No. Bedrooms Per Unit: | |
| | | | #Employees: |
| Addition/Accessory/Other: (S | Sizex) Use: | | Closets in addition? () yes () n |
| ater Supply:County | Existing Well New \ | Nell (# of dwellings using well |) *Must have operable water before final |
| wage Supply: New Sep | | Existing Septic Tank (Complete | |
| | | | 500') of tract listed above? () yes () no |
| | sements whether underground o | | |
| | | Manufactured Homes: | Other (specify): |
| equired Residential Property | Line Setbacks: Con | nments: | |
| | Actual | | |
| ont Minimum | | | |
| ont Minimumear | | | |
| ear | | | |
| | | | |

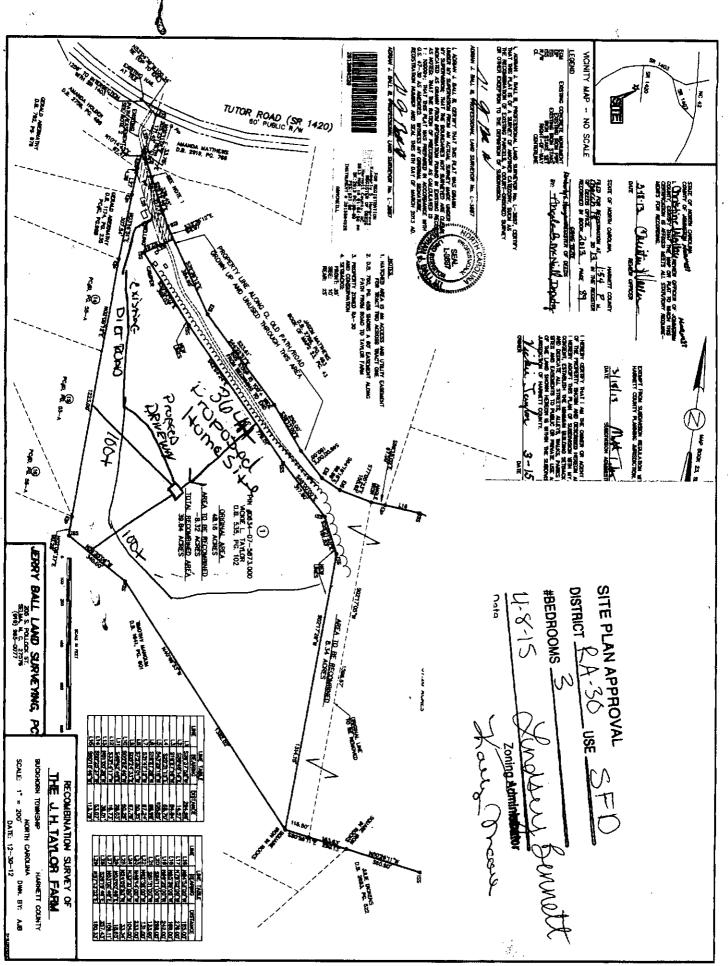
| TO DIREC | (pros | PROPERTY FRO | 19ht | Zd - | Tuen | DOK | M40 | |
|--|--------|--------------|------------------|-------|--------|-------|-------|-------------|
| ······································ | Moich. | <u> </u> | A KI | 7-7 | UPAL | (B) C | US ZI | MOR |
| Pr | opent | y end | ance | imm | edbyel | 400 | st P | |
| <u> එ</u> | بنضور | ∞ 0 | <u>ه - ، (۲</u> | smau | F-HXE | WEL | Perce | <u> పెచ</u> |
| <u>6</u> 2 | dot | Field | · an | K VIS | ilde t | ion ? | 5080° | |
| | | | 1 | | | | | |

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.

Date

Signature of Owner or Owner's Agent

This application expires 6 months from the initial date if permits have not been issued



APPLICATION #: 15566358U7

A

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

| Con | inty Health De | THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT | | | | | |
|---|--|---|--|--|--|--|--|
| | | THIS APPLICATION IS PALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration | | | | | |
| | | on submitted. (complete site plan = 60 months; complete plat = without expiration) | | | | | |
| / | 910-893-7525 c | option 1 CONFIRMATION # | | | | | |
| X En | vironmental Heal | Ith New Septic System Code 8 00 | | | | | |
| [| | ons must be made visible. Place "pink p roperty flags" on each comer i ron of lot. All property learly flagged approximately every 50 feet between corners. | | | | | |
| • | | nouse corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, | | | | | |
| _ | out buildings, sy | wimming pools, etc. Place flags per site plan developed at / for Central Permitting. | | | | | |
| • | Place orange E | nvironmental Health card in location that is easily viewed from road to assist in locating property. | | | | | |
| If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the | | | | | | | |
| | evaluation to be | performed. Inspectors should be able to walk freely around site. Do not grade property. | | | | | |
| • | All lots to be a | ddressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred | | | | | |
| _ | After propering | ncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready. proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code | | | | | |
| • | 800 (after selec | ting notification permit if multiple permits exist) for En vironmental Health inspection. Please note | | | | | |
| | confirmation n | 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. | | | | | |
| □ <u>En</u> | vironmental Heal | Ith Existing Tank Inspections Cod e 800 | | | | | |
| • | Follow above in | structions for placing flags and card on property. | | | | | |
| • | Prepare for inst | pection by removing soil over <u>over outlet end</u> as diagram indicates, and lift lid straight up (if nen close back down. (Unless inspection is for a septic tank in a mobile home park) | | | | | |
| _ | After uncovering | g outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if | | | | | |
| • | multiple permit | s, then u se code 800 for Environmental Health ins pection. Please note confirmation number | | | | | |
| | given at end o | f recording for proof of request. | | | | | |
| • | Use Click2Gov | or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits. | | | | | |
| SEPTION If apply | ing for authorization | on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. | | | | | |
| { <u>_</u> } # | Accepted | {} Innovative | | | | | |
| {_}} / | Alternative | {} Innovative | | | | | |
| The app question | olicant shall notify n. If the answer is | the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant must attach supporting documentation. | | | | | |
| {}}YE | es (X) no | Does the site contain any Jurisdictional Wetlands? | | | | | |
| {}}YF | es {X} no | Do you plan to have an irrigation system now or in the future? | | | | | |
| {}}YI | T | · | | | | | |
| | es (X) no | Does or will the building contain any drains? Please explain. | | | | | |
| -{ ∑ }YI | - | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? | | | | | |
| <u>X</u> Y | es () NO | 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? | | | | | |
| {}}YI {}}YI | es (X) no es (X) no | 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? | | | | | |
| {}}YI | es (X) no es (X) no | 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? | | | | | |
| {}}YI {}}YI | ES (_) NO ES (X) NO ES (_) NO | 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? | | | | | |
| (_)YI {_)YI (_)YI | ES (NO | 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? If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. | | | | | |
| (_)YI {_)YI (_)YI | ES (NO | 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? If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. | | | | | |
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| {}YI {}YI {}YI {}YI I Have State O | ES (_) NO ES (X) NO ES (X) NO ES (_) NO ES (X) NO Read This Applicate officials Are Grante | 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? If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. It and Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. | | | | | |
| {}YI {}YI {}YI {}YI I Have State O I Under | ES (_) NO ES (X) NO ES (X) NO ES (_) NO ES (X) NO Read This Applicate officials Are Grante restand That I Am S | 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? If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And | | | | | |

DATE

OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

3/20/2014 2:40 PM

16.00 / COL

(bE1)

v.

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P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 15-50035847 Date 5/15/15 Subdivision Name Property Zoning RES/AGRI DIST - RA-30 Contractor Owner _____ OWNER MOORE CHARLES E & KATHY A 38 CHALYBEATE RD NC 27526 FUQUAY VARINA Applicant _____ MOORE CHARLES & KELLY Structure Information 000 000 56X32 3BDR W/BASEMENT Flood Zone FLOOD ZONE X 3.00 Other struct info # BEDROOMS PROPOSED USE SFD SEPTIC - EXISTING?

NEW TANK. NEW WELL WATER SUPPLY _____ Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1081058
Issue Date . . . 5/15/15
Expiration Date . . 5/14/16 Valuation _____ Special Notes and Comments T/S: 04/08/2015 09:22 AM LBENNETT --

HARNETT COUNTY CENTRAL PERMITTING

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Page Application Number 15-50035847 Date 5/15/15

Property Address 33085 *UNASSIGNED

Subdivision Name

Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1081058 ______

Required Inspections

| Seq | Phone Insp# | Insp Code | Description | Initials | Date |
|--------|----------------|--------------|--------------------------------|----------|-------|
| | | | | | |
| 10 | 101 | B101 | R*BLDG FOOTING / TEMP SVC POLE | | _ / / |
| 20 | 103 | B103 | R*BLDG FOUND & TEMP SVC POLE | | |
| 20-999 | 113 | B113 | R*BLDG WATER/DAMP PROOFING | | /_/ |
| 20-30 | 814 | A814 | ADDRESS CONFIRMATION | | _/_/ |
| 30-999 | 111 | B111 | R*BLDG SLAB INSP/TEMP SVC POLE | | // |
| 30-999 | 105 | B105 | R*OPEN FLOOR | | // |
| 30-999 | 309 | P309 | R*PLUMB UNDER SLAB | | // |
| 30-999 | 205 | E205 | R*ELEC UNDER SLAB | | |
| 40-50 | 129 | I129 | R*INSULATION INSPECTION | | _/_/_ |
| 40-60 | 425 | R425 | FOUR TRADE ROUGH IN | | _/_/_ |
| 40-60 | 125 | R125 | ONE TRADE ROUGH IN | | _/_/ |
| 40-60 | 325 | R325 | THREE TRADE ROUGH IN | | // |
| 40-60 | 225 | R225 | TWO TRADE ROUGH IN | | // |
| 50-60 | 429 | R429 | FOUR TRADE FINAL | | _/_/ |
| 50-60 | 131 | R131 | ONE TRADE FINAL | | _/_/ |
| 50-60 | 329 | R329 | THREE TRADE FINAL | | _/_/ |
| 50-60 | 229 | R229 | TWO TRADE FINAL | | _/_/ |
| 999 | | H824 | ENVIR. OPERATIONS PERMIT | | _/_/_ |

HARNETT COUNTY CENTRAL PERMITTING
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LILLINGTON, NC 27546
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Page 2
Application Number 15-50035847 Date 5/15/15

Special Notes and Comments
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations