

Initial Application Date: 12-9-15

REF: 1550037671  
Detached Garage

Application #

House  
1550037670

CU#

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\*\***

LANDOWNER: Edward Patterson Mailing Address: 911 Lloyd Stewart Rd  
City: Broadway State: NC Zip: 27505 Contact No: 919-413-4033 Email: \_\_\_\_\_

APPLICANT\*: McBuckin, Joanne Mailing Address: 2742 Fernwood Ave  
City: Roslyn State: PA Zip: 19001 Contact No: 215-266-7486 Email: micciolo@fine@yahoo.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Edward Patterson Phone # 919-413-4033

PROPERTY LOCATION: Subdivision: Cedar Landing Lot #: 2 Lot Size: 1.31  
State Road # 71 State Road Name: Georgie Dr. Map Book & Page: 2007, 699  
Parcel: 130601 0082 01 PIN: 0601-86-1676.000  
Zoning: RA30 Flood Zone: - Watershed: NS-IV Deed Book & Page: 2044, 357 Power Company\*: \_\_\_\_\_

\*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

**PROPOSED USE:**

- SFD: (Size 70 x 55) # Bedrooms: 3 # Baths: 2 1/2 Basement(w/wo bath): N/A Garage: N/A Deck:  Crawl Space: yes Slab: N/A Monolithic Slab: \_\_\_\_\_  
(Is the bonus room finished? ( ) yes ( ) no w/ a closet? ( ) yes ( ) no (if yes add in with # bedrooms))
- Mod: (Size \_\_\_\_\_ x \_\_\_\_\_) # 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: \_\_\_\_\_ SW \_\_\_\_\_ DW \_\_\_\_\_ TW (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ Garage: \_\_\_\_\_ (site built? \_\_\_\_\_) Deck: \_\_\_\_\_ (site built? \_\_\_\_\_)
- Duplex: (Size \_\_\_\_\_ x \_\_\_\_\_) No. Buildings: \_\_\_\_\_ No. Bedrooms Per Unit: \_\_\_\_\_
- Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: \_\_\_\_\_
- 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 Water underground  
power overhead

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

**Required Residential Property Line Setbacks:**

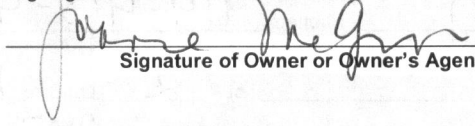
	Minimum	Actual
Front	<u>35</u>	<u>70</u>
Rear	<u>25</u>	<u>25+</u>
Closest Side	<u>10</u>	<u>15</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: \_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

421 N - Right on  
Cool Springs Rd at Boone trail Fire Station -  
turn Left on Holly Springs Church Rd -  
property approx a mile on Right - Georgie  
Drive - 2nd Lot on the left

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 submitted. 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

12-9-15  
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\*\*

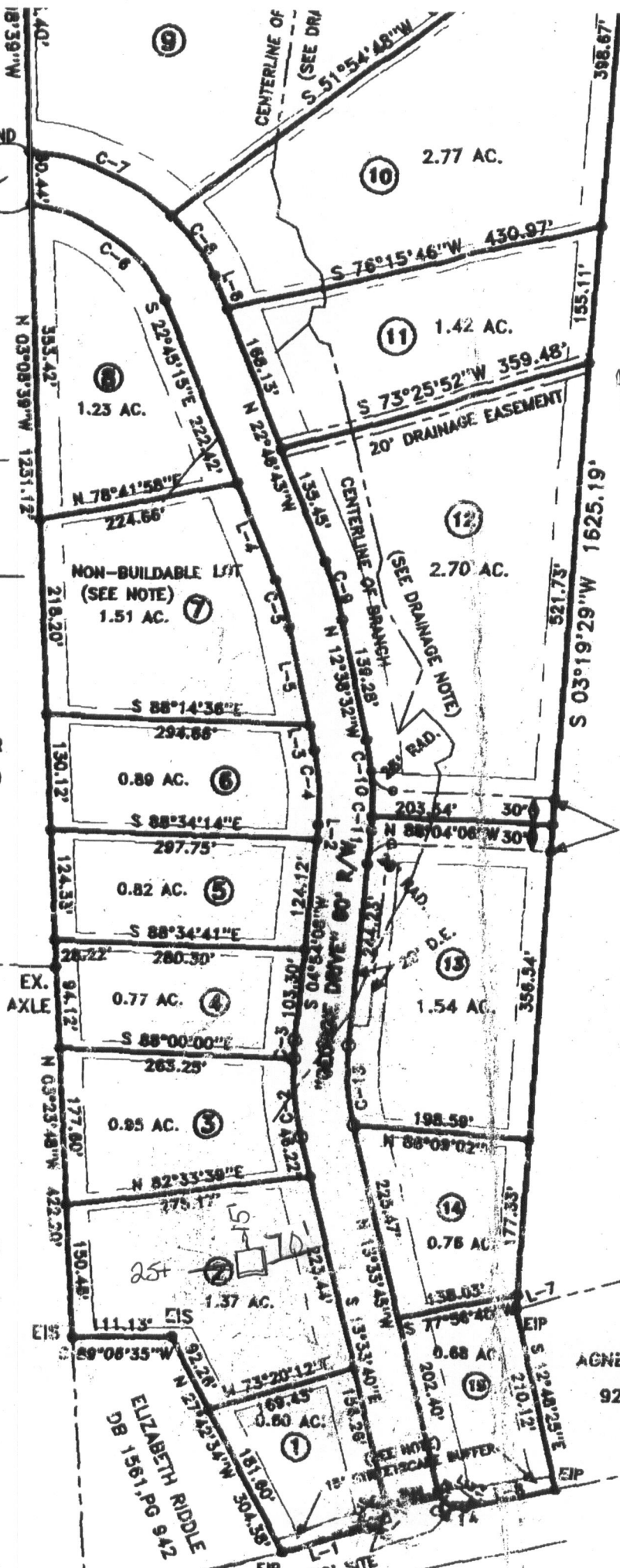
PERSON  
673

TURN AROUND

SON & SONS  
1/2, PG 968

WILLIAM CORDER  
1542, PG 240  
F, SL 611-D

DE PATTERSON  
1888, PG 713



SITE PLAN APPROVAL

DISTRICT RA-30 USE SFD

#BEDROOMS 3

Date 12/9/15 Zoning Administrator LB

*House is 70x55*  
*Jane McNeill*

SAMMY E. McNEILL  
DB 2044, PG 353  
MAP NO. 2005-143

- "GE"
- CURVE I
  - C-1
  - C-2
  - C-3
  - C-4
  - C-5
  - C-6
  - C-7
  - C-8
  - C-9
  - C-10
  - C-11
  - C-13
  - C-14

PROPOSED  
60' INGREE, EGRESS, REGRESS  
AND UTILITY EASEMENT

- COURSE
- L-1
- L-2
- L-3
- L-4
- L-5
- L-6
- L-7
- L-8

- SIGN
- COURSE BE
- L9 N 58°
- L10 S 31°
- L11 S 58°
- L12 N 31°
- L13 S 58°
- L14 S 31°

AGNES McNEILL  
92-E-93

ELIZABETH RIDDLE  
DB 1561, PG 942

NAME: Joanne McGuckin

APPLICATION #: \_\_\_\_\_

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

**County Health Department Application for Improvement Permit and/or Authorization to Construct**

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # 013294-LB-12-10-15

**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 lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental 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 **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note 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 Health Existing Tank Inspections** Code 800

- Follow above instructions for placing flags and card on property.
- 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)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

**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       Conventional       Any  
 Alternative       Other \_\_\_\_\_

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES  NO Does the site contain any Jurisdictional Wetlands?
  - YES  NO Do you plan to have an irrigation system now or in the future? don't know
  - YES  NO Does or will the building contain any drains? Please explain. \_\_\_\_\_
  - YES  NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
  - YES  NO Is any wastewater going to be generated on the site other than domestic sewage?
  - YES  NO Is the site subject to approval by any other Public Agency?
  - YES  NO Are there any Easements or Right of Ways on this property?
  - YES  NO Does the site contain any existing water, cable, phone or underground electric lines? UTILITIES OUT THERE
- If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

**I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.**

**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.**

Joanne McGuckin  
 \_\_\_\_\_  
 PROPERTY OWNERS OR OWNERS/LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

12-9-15  
 \_\_\_\_\_  
 DATE