Initial Application Date: 2-16-16

Residential Land Use Application

Central Permitting

CPSF Application #_	165003801	LAR
	011#	, 1

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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" Kenneth Cammings 4 CMailing Address: 630 Griffin RD State/VC Zip27546 Contact No: 910 984 6765 Email: APPLICANT : Kenneth Cummings Mailing Address: 620 Briffin RD State: NC Zip: 275 #6 Contact No: 910 984-6765 Email: CONTACT NAME APPLYING IN OFFICE: Kennett Cum minss Phone # 910 984 6765 PROPERTY LOCATION: Subdivision: ROSS MCRAC Brac Lot #: 4 Lot Size: 1-91 Brue Or. State Road Name: PIN: 151030-43-5348.000 Zoning: 2930 Flood Zone: NA Watershed: X Deed Book & Page: 3359/645 Power Company*: from Progress Energy. *New structures with Progress Energy as service provider need to supply premise number ____ PROPØSED USE: Monolithic C * 65)# Bedrooms: # Baths: Basement(w/wo bath): ___ Garage: ### Beck: ___ Crawl Space: Slab: (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms) _) # Bedrooms___ # Baths___ Basement (w/wo bath)___ Garage:___ Site Built Deck:___ On Frame___ Off Frame_ Mod: (Size ___ (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: 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 Structures (existing or proposed): Single family dwellings: ______ Manufactured Homes: Required Residential Property Line Setbacks: Actual Front 14 HOT Rear Closest Side Sidestreet/corner lot Nearest Building on same lot 03/11

Page 1 of 2
APPLICATION CONTINUES ON BACK

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mits are granted I a by state that foreg	oing statements are accurat	ances and laws of the State te and correct to the best of	my knowledge. Permit	lating such work	and the specificatio	ns of plans sub
	Hand C		,	2-15-16		tion is provided
_	Signature of Own	er 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: Kanneth (um mG

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 #_

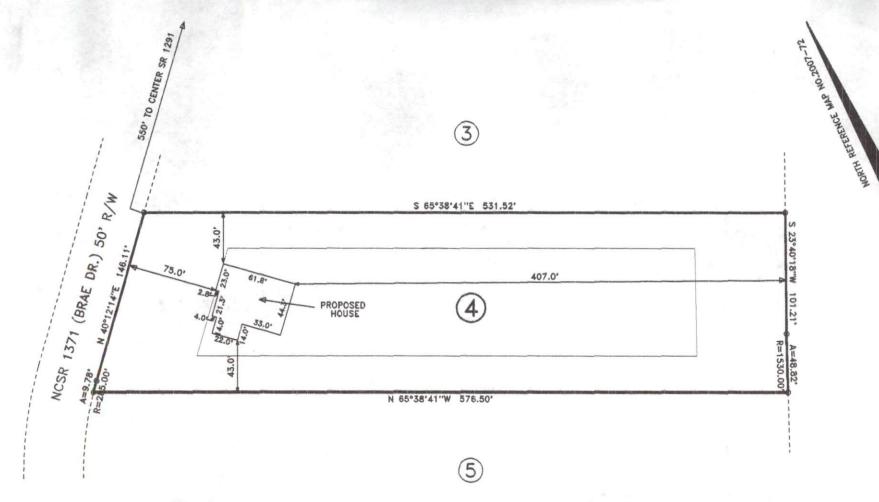
Environmental Health New Septic System Code 800

- 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 <u>undergrowth</u> 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. <u>Please note</u> 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 author	orization to construct please in	dicate desired system type(s):	can be ranked in order of preferen	ice, must choose one.
{} Accepted		(Conventional	() Any	
{}} Alternative			_	
The applicant shall question. If the ans	notify the local health depart wer is "yes", applicant MUS	ment upon submittal of this a T ATTACH SUPPORTING	pplication if any of the following DOCUMENTATION:	g apply to the property in
YES (O Does the site contain	any Jurisdictional Wetlands?		
(_)YES (_)N	O Do you plan to have	an irrigation system now or ir	the future?	
_ YES _ N	NO Does or will the build	ling contain any drains? Pleas	se explain	
	NO Are there any existing	g wells, springs, waterlines or	r Wastewater Systems on this pro	operty?
{_}}YES {	NO Is any wastewater go	ing to be generated on the site	e other than domestic sewage?	
YES (NO Is the site subject to a	approval by any other Public	Agency?	
(_)YES (_1)	Are there any Easeme	ents or Right of Ways on this	property?	
_ YES _ N	NO Does the site contain	any existing water, cable, ph	one or underground electric line	s?
	If yes please call No	Cuts at 800-632-4949 to loca	ate the lines. This is a free service	ce.
I Have Read This A	pplication And Certify That T	he Information Provided Here	in Is True, Complete And Correct	t. Authorized County And
			o Determine Compliance With Ap	
			Labeling Of All Property Lines Ar	nd Corners And Making
The Site Accessible	So That A Complete Site Evaluation	17	(CNATUDE (DECUIDED)	2-16-16 DATE
DECEMBER OF	MEDG OD OUNEDGIEG	AT DEDDESERITATIONS	(- N A - 1 1 1 1 1 1 1 1 1 1	IIA I K



FRONT ----- 75'
REAR ----- 75'

DEED REFERENCE
DEED BOOK 3359,PAGE 645

MAP NO. 2007-72

OWNER: KENNETH CUMMINGS LLC

75 421 130 421	N PLOT PLA	PLOT PLAN - LOT 4 ROSS MCRAE BRAE S/D		BENNETT SURVEYS F-1304 1662 CLARK RD., LILL INGTON, N. C. 27546 (910) 893-5252		
5 80	TOWNSHIP UPPER LITTLE RIVE	R COUNTY HARNETT	20' 0 40'	SURVEYED BY:	FIELD BOOK	
SITE SR 1291	STATE: NORTH CAROLINA	DATE: SEPTEMBER 19,2018	SCALE: 1' - 80'	DRAWN BY: MRB	DRAWING NO	
VIORITY MAP	RA-30 WATERSHED DIST	PIN # 0630-83-5348.000	CHECKED & CLOSUR	E BY: MRB	18330	

Payment Receipt Confirmation

Your payment was successfully processed.

Transaction Summary

Description	Amount
Liens NC	\$25.00
Total Amount Paid	\$25.00

Customer Information

Customer Name

kennethcummings

Local Reference ID

141383

Receipt Date Receipt Time 2/15/2016 02:24:13 PM EST

Payment Information

Payment Type

Credit Card

Credit Card Type

VISA

Credit Card Number

*****1019

Order ID

16517942

Billing Name

kennethcummingsllc

Billing Information

Billing Address

630

Billing City, State

lillilgton, NC

ZIP/Postal Code

27546

Country

US

Phone Number

9109846765

Fax Number