

Initial Application Date: 8/11/16
10/19/16



Application # 1650039512R

Central Permitting

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
105 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

CU# _____

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Kresty Jones Dev. Mailing Address: Same as below
City: " State: " Zip: " Contact No: " Email: "

APPLICANT: Cumberland Homes, Inc. Mailing Address: P.O. Box 727
City: Dunn State: NC Zip: 28335 Contact No: 910-892-4345 Email: joannorris@centurylink.net
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Linda or Joan Phone # 910-892-4345
Carolina Seasons

PROPERTY LOCATION: Subdivision: 52 Spring Flowers Dr. Cameron Lot #: 12 Lot Size: 1/2 ac. .38 AC
State Road # 11 State Road Name: 11 Map Book & Page: 2009 P.10

Parcel: 09950702000611 PIN: 9567-02-8014
Zoning: RA-30 Flood Zone: X Watershed: NA Deed Book & Page: 2581/211 Power Company: Central Elec.

*New structures with Progress Energy as service provider need to supply premise number 0TP from Progress Energy.

PROPOSED USE:

SFD: (Size 44' x 54') # Bedrooms: 3 # Baths: 2 1/2 Basement (w/wo bath): _____ Garage: Patio Crawl Space: _____ Slab: Monolithic Slab: _____
(Is the bonus room finished? yes () no w/ a closet? () yes no (if yes add in with # bedrooms)

Mod: (Size _____) # 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 _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)

Duplex: (Size _____) No. Buildings: _____ No. Bedrooms Per Unit: _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____) 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: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

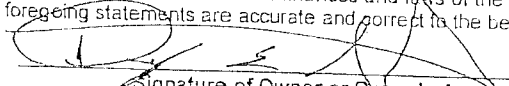
Front	Minimum	Actual
Front	<u>35</u>	<u>36'</u>
Rear	<u>25</u>	<u>26'10"</u>
Closest Side	<u>10</u>	<u>12'</u>
Sidestreet/corner lot	<u>20</u>	
Nearest Building on same lot	<u>N/A</u>	

Comments: 10-19-16 Revision no
See - septic report

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

16 miles TR on Johnsonville Sch. Rd. go to stop TR go 1 1/2 miles to entrance of Carolina Seasons Hwy 27 W from Lillington go approx.

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.

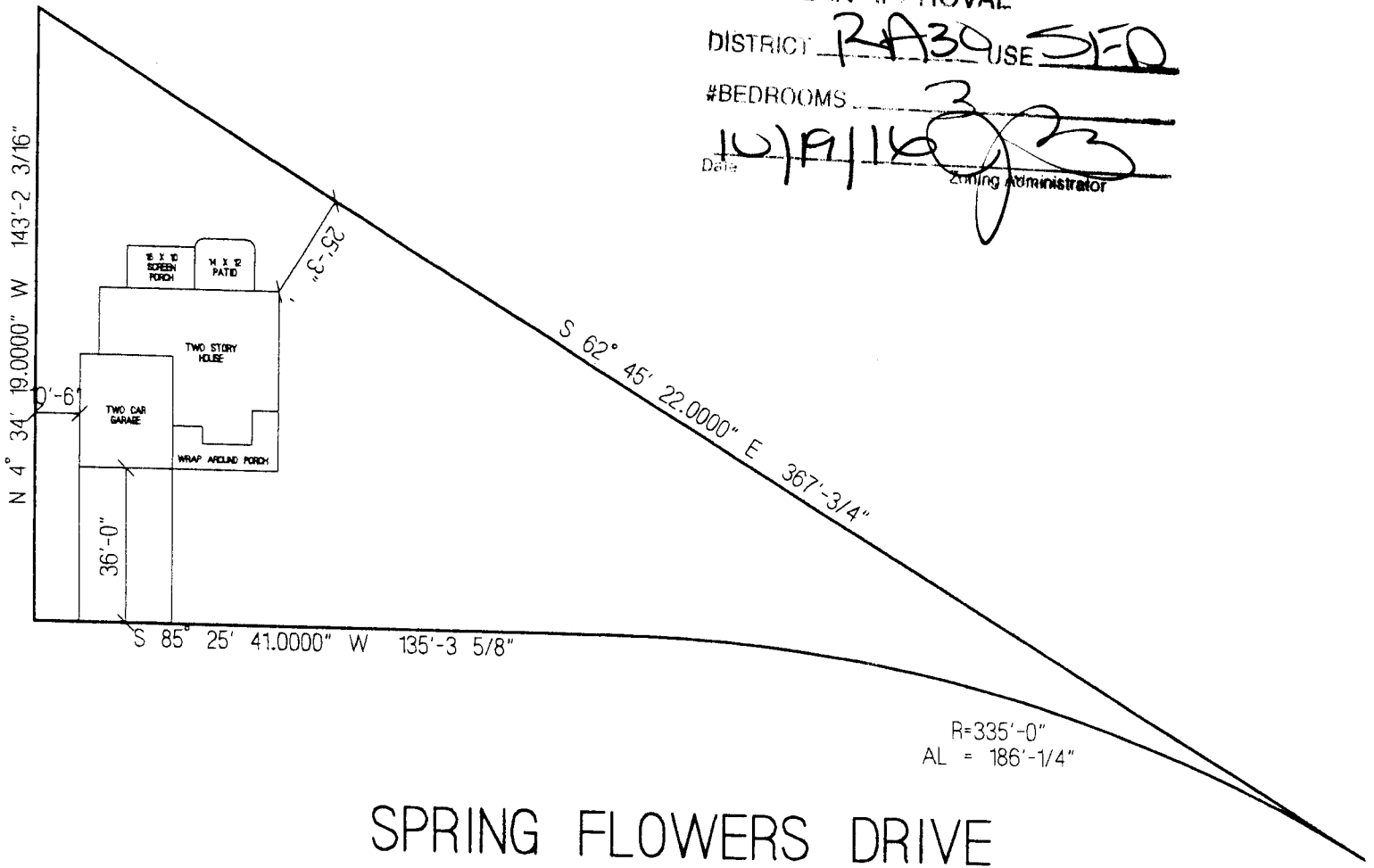

Signature of Owner or Owner's Agent

8/11/16
Date

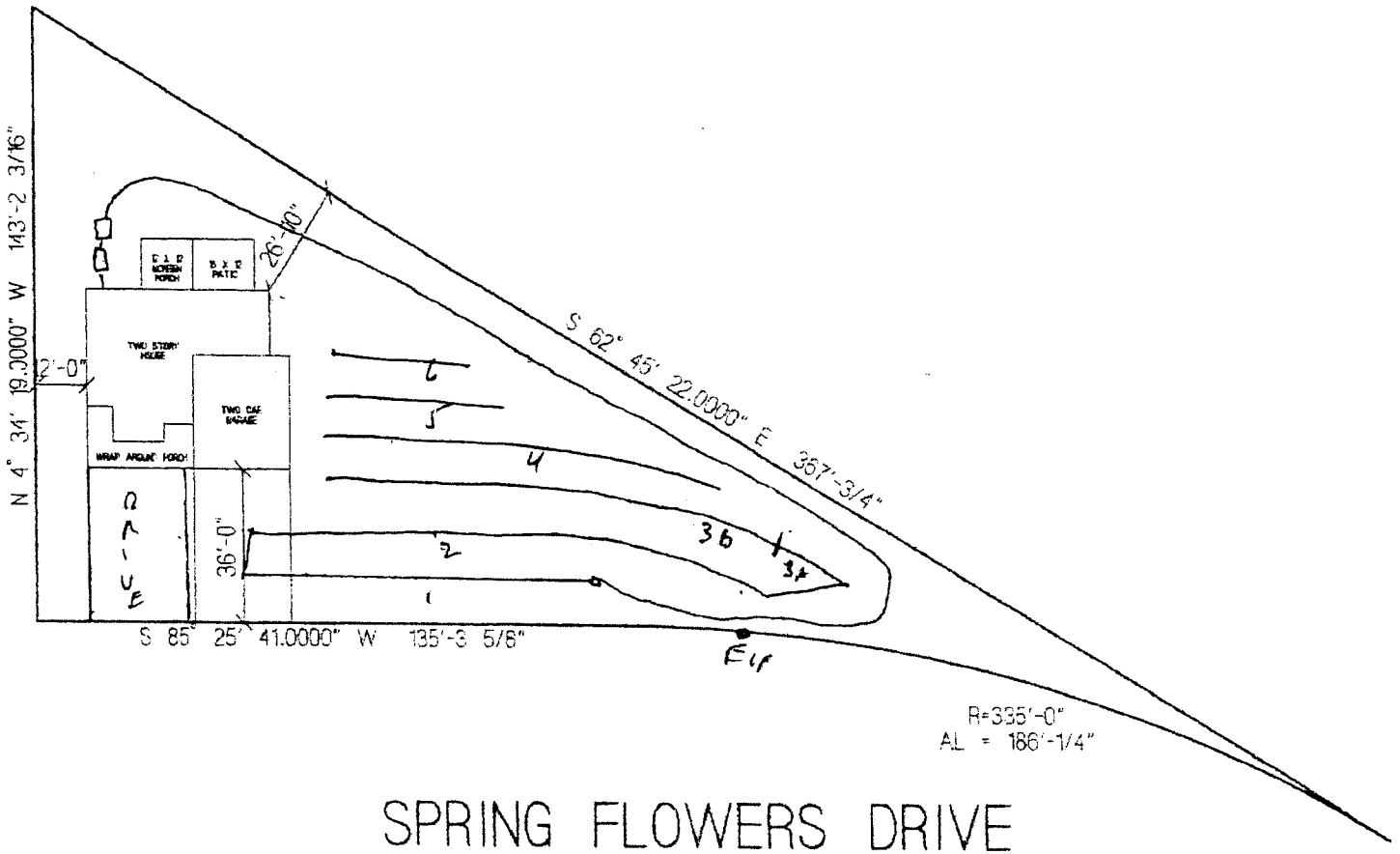
It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

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

REUSILM
 SITE PLAN APPROVAL
 DISTRICT RA30 USE SFD
 #BEDROOMS 3
 Date 10/19/16
 Zoning Administrator



TMD RESIDENTIAL PROPERTIES, LLC.
 LOT # 12 CAROLINA SEASONS
 THE TIFFANY WITH SCREEN PORCH
 SCALE: 1"=40'



TMD RESIDENTIAL PROPERTIES, LLC.
 LOT # 12 CAROLINA SEASONS
 THE TIFFANY WITH SCREEN PORCH
 SCALE: 1"=40'

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: CAROLINA SEASONS

LOT 12

INITIAL SYSTEM: APPROVED 25% REDUCTION

REPAIR APPROVED 25% REDUCTION

DISTRIBUTION: SERIAL

DISTRIBUTION SERIAL

BENCHMARK: 100.0

LOCATION POINT ON FRONT LINE

NO. BEDROOMS: 3

LTAR 0.4 GPD/FT²

LINE	FLAG COLOR	ELEVATION	LENGTH
1	B	99.17	80'
2	O	98.17	120'
3A	W	97.17	25'
			<u>225'</u>
3B	W	97.17	85'
4	Y	96.17	90'
5	B	95.08	40'
6	W	94.00	30'
			<u>250'</u>

Initial system

BY M. EAKER

DATE 09/2016

TYPICAL PROFILE

- 0-12 W (VF₂/VF₁)
- 12-30 SCC (F₁/F_{11-36R})
- 30-48 coarse LL (VF₁-max)
- LN 2 742"
- FINAL INITIAL AT 12"
- ADD 6" COVER

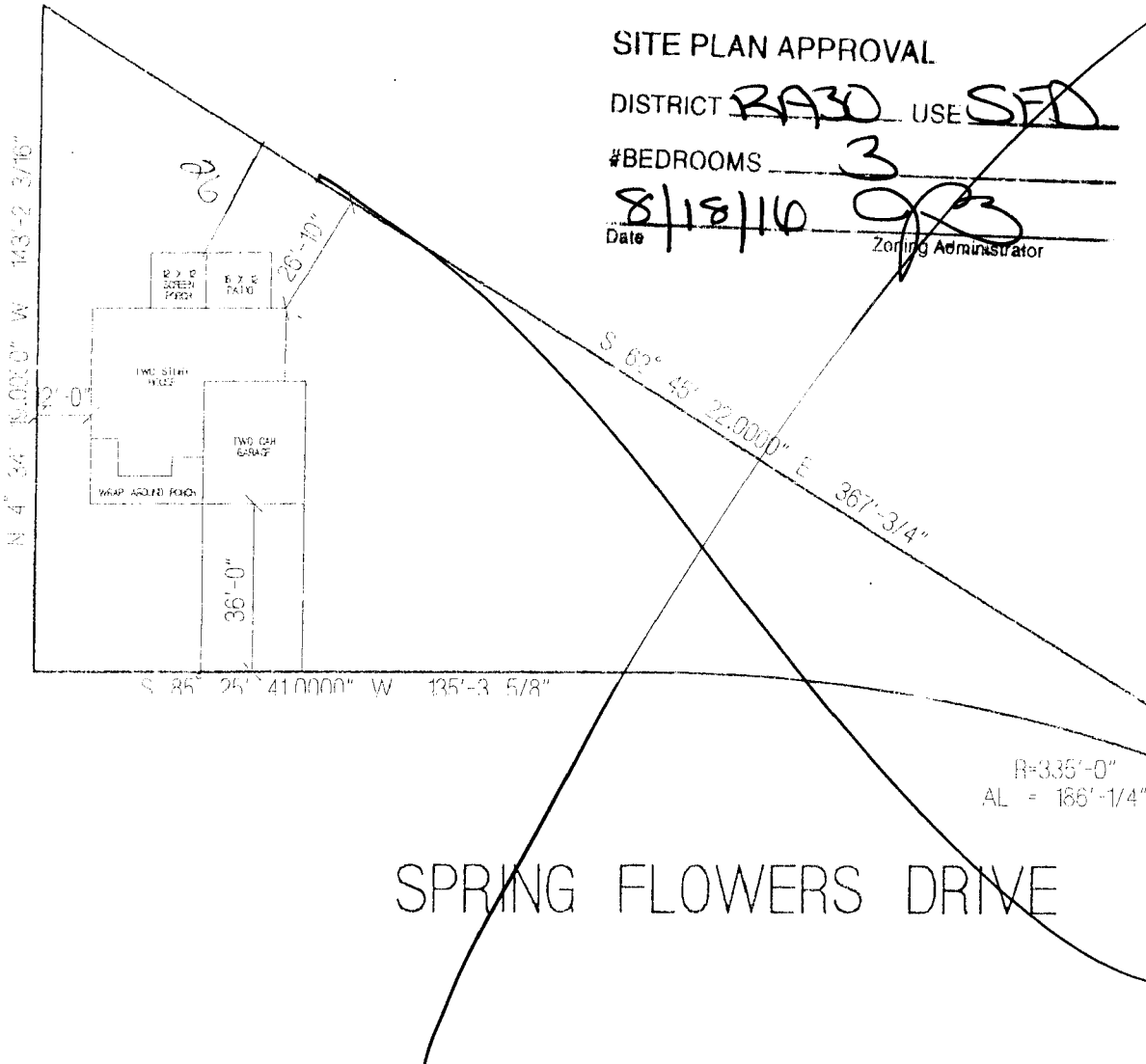
- * THERE SHALL BE NO GRADING,
- * CUTTING, LOGGING OR OTHER SOIL
- * DISTURBANCE IN SEPTIC AREA
- * CRITICAL
- * NO SOIL REMOVAL IN DRAINFIELD AREA

SITE PLAN APPROVAL

DISTRICT RA30 USE SFD

#BEDROOMS 3

Date 8/18/10 [Signature]
Zoning Administrator



SPRING FLOWERS DRIVE

TMD RESIDENTIAL PROPERTIES, LLC.
LOT # 12 CAROLINA SEASONS
THE TIFFANY WITH SCREEN PORCH
SCALE: 1"=40'

NAME: 52 Spring Flowers DR Cameron, NC

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 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?
 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?

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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

Plan Box # AA1

Date 10/19/14

Job Name Cumberland

App # 39512

Valuation 2,39,338

SQ Feet 2493

Garage 580

= 3073

Inspections for SFD/SFA

Crawl

Slab

Mono

Basement

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey

Envir. Health

Other

Additions / Other

Footing

Foundation

Slab

Mono

Open Floor

Rough In

Insulation

Final

Plan had to change for septic