

Initial Application Date: 1-9-17

TOWN OF ERWIN
INFO ONLY

Application # 1750040525

CU# _____

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: Joshua Blackman Carla

Mailing Address: 702 Lucas St

City: Erwin

State: NC

Zip: 28339

Contact No: 919-820-1273

Email: JBlackman03@yahoo

APPLICANT*: Joshua Blackman

Mailing Address: _____

City: _____

State: _____

Zip: _____

Contact No: _____

Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____

Phone # _____

PROPERTY LOCATION: Subdivision: River Crest

Lot #: 3

Lot Size: .71

State Road # _____

State Road Name: 90 Pump Station Rd

Map Book & Page: 2010, 572

Parcel: 020597 0037 09

PIN: 0587-98-3576-000

Zoning: Erwin

Flood Zone: -

Watershed: -

Deed Book & Page: 3459, 107

Power Company*: _____

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

PROPOSED USE:

SFD: (Size 60 x 70) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): 0 Garage: Deck: Crawl Space: Slab: Slab: 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

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

Required Residential Property Line Setbacks:

Comments: _____

Front Minimum _____ Actual 42'

Rear _____ 25'

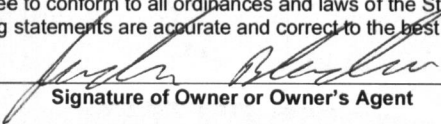
Closest Side _____ 42'

Sidestreet/corner lot _____

Nearest Building on same lot _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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

1-9-17
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: Josha Blackmon

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.

Josha Blackmon
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1-9-17
 DATE

PROPERTY OF:

JOSHUA W. BLACKMON & wife, CARLA C. BLACKMON

Owners Address: 702 Lucas Street, Erwin, N.C. 28339
Property Address: 90 Pump Station Road, Erwin, N.C. 28339

ERWIN, DUKE TWP., HARNETT COUNTY, N.C.

SURVEY BY: JOYNER PIEDMONT SURVEYING

License No. F-0712
105 East Cumberland Street, P.O. Box 115, Dunn, N.C. 28334
Phone (910) 892-2511

ZONE: DECEMBER 06, 2016 SCALE: 1" = 30'
REVISION: JANUARY 04, 2017

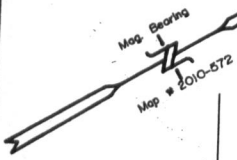


12-4-16

NOTE: Deed Reference: Deed Book 3459, Page 107
(Map # 2010-572)
PIN # 0587-98-3576.000
Parcel ID # 060597 0037 09

NOTE: Property Served By Harnett County Water & Individual Septic Tank.

Tonny E. Upchurch
and
Susan J. Upchurch
Deed Book 984, Page 73
Plat Cabinet "F", Slide 177-C

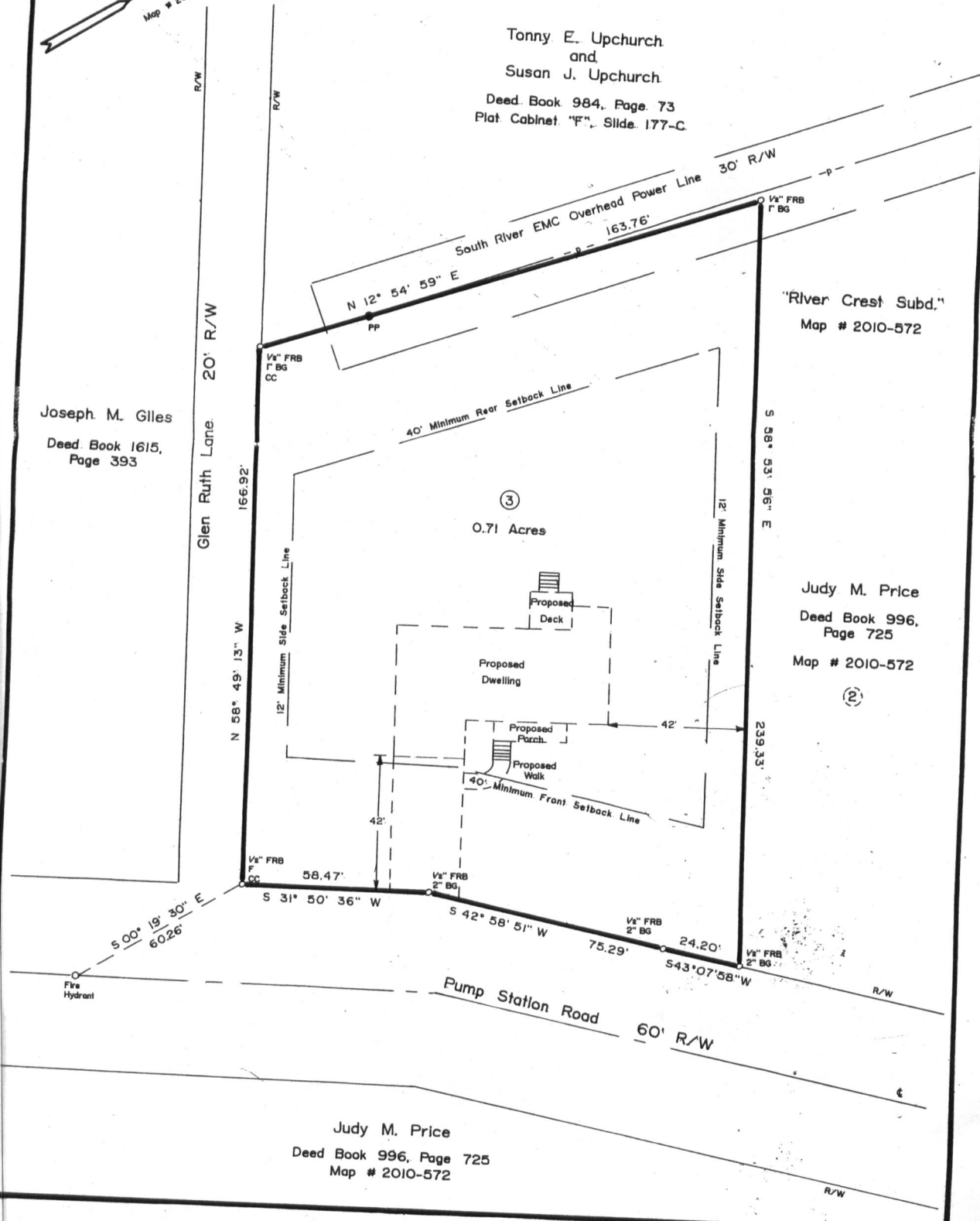


Joseph M. Gilles
Deed Book 1615,
Page 393

"River Crest Subd."
Map # 2010-572

Judy M. Price
Deed Book 996,
Page 725
Map # 2010-572

Judy M. Price
Deed Book 996, Page 725
Map # 2010-572





Town of Erwin

Zoning Application & Permit

Planning & Inspections Department

Permit #

Rev Sep 2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Joshua Blackmon	Property Owner	11
Home Address	702 Lucas St	Home Address	11
City, State, Zip	Erwin NC 28339	City, State, Zip	11
Telephone	919-800-1273	Telephone	11
Email	Sblackmon03@yahoo.com	Email	11

Address of Proposed Property		90 Pump Station Rd	
Parcel Identification Number(s) (PIN)	0587-78-357600	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.		Single Family Residential Home	
Description of any proposed improvements to the building or property		New SFD	
What was the Previous Use of the subject property?		Vacant Land	
Does the Property Access DOT road?		Yes	
Number of dwelling/structures on the property already	0	Property/Parcel size	.71 acre
Floodplain SFHA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Watershed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
MUST circle one that applies to property	Existing/Proposed Septic System <input checked="" type="checkbox"/> Or Existing/Proposed County/City Sewer <input type="checkbox"/>		

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

<u>Joshua Blackmon</u>	<u>[Signature]</u>	1-9-17
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	RD	Existing Nonconforming Uses or Features	
Front Yard Setback	40'	Other Permits Required	<input type="checkbox"/> Conditional Use <input checked="" type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input checked="" type="checkbox"/> Other
Side Yard Setback	12'	Requires Town Zoning Inspection(s) <input type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.	
Rear Yard Setback	40'	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments		Fee Paid: \$10	Date Paid: 1/9/17

Comments	Staff Initials: <u>SB</u>
Signature of Town Representative: <u>[Signature]</u>	
Date Approved/Denied: 1/9/17	

PAID

JAN 09 2017

PAID

JAN 10 2017

TOWN OF ERWIN

Pdc # 1270

TOWN OF ERWIN

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.

Application Number 17-50040525 Date 1/09/17
Property Address 91750 TECH 3
PARCEL NUMBER - - - - -
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning UNZONED

Owner

Contractor

BLACKMON JOSHUA & CARLA
702 LUCAS ST
ERWIN NC 28339
(919) 820-1273

OWNER

Applicant

BLACKMON JOSHUA
702 LUCAS ST
ERWIN NC 28339
(919) 820-1273

--- Structure Information 000 000 60X70 3BDR W/GARAGE W/DECK CRAWL
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW
WATER SUPPLY COUNTY

Permit RESIDENTIAL PLUMBING PERMIT

Additional desc
Phone Access Code 1174077
Issue Date 1/09/17 Valuation 0
Expiration Date 1/09/18

Special Notes and Comments

T/S: 01/09/2017 12:46 PM LBENNETT --
90 PUMP STATION RD
CORNER OF PUMP STATION RD AND GLEN RUTH
LN - THERE WILL BE A BLUE MARKED STAKE
WHERE I WOULD LIKE FOR METER TO BE
XX
PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
INSULATION AND LAND USE.
XX
Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

Application # 40525

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: Joshua Blackmon Phone: 919-870-1273

Owner (s) Mailing Address: 702 Lucas St
Erwin NC 28339

Land Owner Name (s): Joshua Blackmon Phone: _____

Construction or Site Address: 90 Pump Station Rd

PIN # 0587-98-3576-000 Parcel # 0605970037 09

Job Cost: _____ Description of Work to be done New construction
single family home

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I _____ will provide the _____ labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is _____, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Doing work as owner

Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Structure Owner / Contractor Signature: Joshua Blackmon Date: 1/9/17

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**