Initial Application Date(



CU#

Central Permitting

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

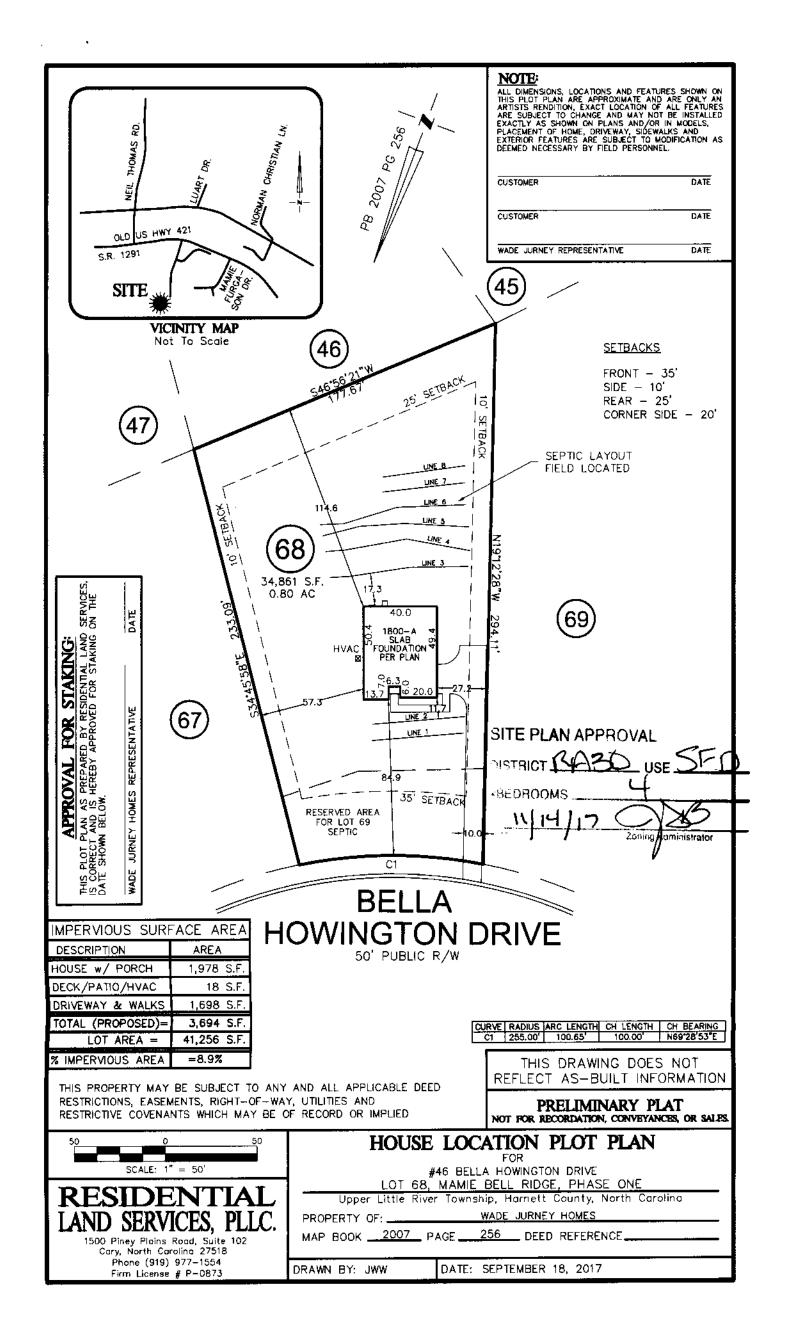
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Dakota Land Partners, LI	_C	Mailing	Address: 55	11 Ramsey St	reet, Suite 100
City: Fayetteville s	tate: NC Zip: 28311	_Contact No	910-401-5	504 E	reet, Suite 100 mail: _Jeri.Elkins@mossycreekmgmt.c0/
APPLICANT*: Dakota Land Partners, LL	C Mailing Ar	ddress:			
City: S *Please fill out applicant information if different than	tate:Zip:	_ Contact No:	:	E	mail:
CONTACT NAME APPLYING IN OFFICE:	leri Elkins			Phone	#_910-401.5504
PROPERTY LOCATION: Subdivision:	nie Bell Ridge				
State Road # State Road	Name: Old US 421				Map Book & Page: 2001 / 256
Parcel: 13063001 0029			0630	55 329	7
Zoning: RA-30 Flood Zone: 🗡 Wa	itershed: NA Deed	Book & Page	:3074	776Pow	er Company*:
*New structures with Progress Energy as sel					
PROPOSED USE:	2				
1 SFD: (Size <u>40 x 50</u>) # Bedrooms:	ン X# Raths: Z- Basomo	nt(w/wo hath). Garao	ie: Neck:	Craud Space: Slah: Slah:
					yes add in with # bedrooms)
					t Deck: On Frame Off Frame
(is the second	floor finished? () yes	() NO AN	y other site b	unt additions? () yes () no
Manufactured Home:SWDW	TW (Sizex) # Bedro	ooms: G	arage:(site	built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildir	aas: No	. Bedrooms P	er Unit:		
☐ Home Occupation: # Rooms:	Use:	+	lours of Oper	ration:	#Employees:
☐ Addition/Accessory/Other: (Sizex) Use:	.			Closets in addition? () yes () no
Water Supply: County Existin	g Well New Well	(# of dwelling	s using well) *Mu	st have operable water before final
Sewage Supply: <u> </u>	mplete Checklist)	_Existing Sep	ptic Tank (Co	mplete Checklis	cf) County Sewer
Does owner of this tract of land, own land tha	t contains a manufacture	d home within	n five hundre	d feet (500') of t	ract listed above? () yes () no
Does the property contain any easements wh	ether underground or ove	erhead () y	yes (✔) n	0	
Structures (existing of proposed). Single fam	ly dwellings:	Manuf	actured Hom	es:	Other (specify):
Required Residential Property Line Setb	icks: Commer	nts: * Pe	ising }	oa3b	edroom home w/
Front Minimum 35 Actual	to 84.9	tinisl	red by	105 - 501	ne sq. footage and
Rear <u>25</u> 1	<u>* 114.9 </u>	foot pu	<u>int - :</u>	just cho	inging 4th Bed to
Closest Side 15	<u>⊬</u> ଇ <u>ୀ. </u>	_bov/v	<u>'</u>		U ()
Sidestreet/corner lot					
Nearest Building on same lot					

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 N, left onto Willie Camera	on Ro
right onto Old US Huy 421, left on Mamie Ferguson	<u>~</u> . ∩c
left onto Manie Bell Circle	
	
	_
f 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 hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is prov	submitted. ided.
517/7	
Signature of 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:	Panners, LLC		APPLICATION #:	
	This application to be	e filled out when applying	for a septic system inspection.	
County Health	Department Applica	tion for Improvement	t Permit and/or Authorization to Constru	ıct
IF THE INFORMATION	IN THIS APPLICATION IS	S FALSIFIED, CHANGED, OF	R THE SITE IS ALTERED, THEN THE IMPROVEMEN	VT
PERMIT OR AUTHORE	ZATION TO CONSTRUCT	SHALL BECOME INVALID.	The permit is valid for either 60 months or without expir	ation
		site plan = 60 months; Comple	•	
910-893-752			CONFIRMATION #	
	Health New Septic Sys			
All property	<u>irons must be made</u>	<u>visible</u> . Place "pink pro	perty flags" on each corner iron of lot. All pro	perty
		imately every 50 feet bety		
Place "orang	e nouse corner flags" a	t each corner of the propo	osed structure. Also flag driveways, garages, d	lecks
			developed at/for Central Permitting.	
			sily viewed from road to assist in locating prope	
			that you clean out the <u>undergrowth</u> to allow th	e soi
			k freely around site. <i>Do not grade property</i> .	
			nfirmation. \$25.00 return trip fee may be inco property lines, etc. once lot confirmed ready	
			at 910-893-7525 option 1 to schedule and use	
			st) for Environmental Health inspection. <u>Please</u>	
		recording for proof of req		, note
			eed to Central Permitting for permits.	
	_	nspections Code 800	source of states in community for positions.	
		flags and card on proper	rtv	
			tank as diagram indicates, and lift lid straight	up (i
			is for a septic tank in a mobile home park)	-p (
	VE LIDS OFF OF SEPTIC			
 After uncove 	ring outlet end call the	voice permitting system :	at 910-893-7525 option 1 & select notification p	ermi
			lealth inspection. Please note confirmation nu	ımbe
	of recording for proof of			
 Use Click2Gr 	ov or IVR to hear results	 Once approved, procee 	ed to Central Permitting for remaining permits.	
SEPTIC				
If applying for authoriza	ation to construct please ind	licate desired system type(s):	can be ranked in order of preference, must choose one	÷.
		{x Conventional		
{}} Alternative	{} Other			
The applicant shall not	ify the local health departr	nent upon submittal of this:	application if any of the following apply to the prope	erty in
		F ATTACH SUPPORTING		
I IVES IXINO	Doge the cite contain o	ny Juriodiational Watlanda'i)	

{_}} Acce	pted	{} Innovative {_x } Conventional {} Any
{}} Alter	mative	{ J Other
		the local health department upon submittal of this application if any of the following apply to the property "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{ <u>x</u> } NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	{ <u>x</u> } N O	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}}YES	{ <u>*</u> } NO	Does or will the building contain any drains? Please explain.
{}}YES	(<u>x</u>) NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{_}}YES	{ <u>x</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	{ <u>x</u> } NO	Is the site subject to approval by any other Public Agency?
{}}YES	{ <u>×</u> } №	Are there any Easements or Right of Ways on this property?
{}}YES	{ <u>x</u> } 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)

10/10