7/18/17
Initial Application Date: 6/13/17

Application # _	17500	4161	9 R

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.hernettong/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION!" DATE:
EANDOWNER: Signature Home Builders Mailing Address: 1209 N. Main 57.
City: Lillington State: NC Zip: 27546 Contact No: 910 - 892 - 9299 Email: Csherod. sho gmail.com
City: Ouchan State: NC zip: 17705 Contact No: Email:
City: Ouchan State: NC Zip: 17705 Contact No: Email:
CONTACT NAME APPLYING IN OFFICE: Chris Shorrod, Project Managerhone # 910-985-1136
PROPERTY LOCATION: Subdivision: Lot \$\frac{3}{2}\$ Lot \$\text{Size} \frac{1.05}{2}\$
State Road # 1853 State Road Name: Map Book & Page: 2016 / 389
Parcel: 071509 0008 04 PIN: 1504-85-1267, 000
Zoning: KA-UD Flood Zone: X Watershed: Deed Book & Page: 2145 1427 Power Company': Duke Energy
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
PROPOSED USE: Stow Wall Monolithic SFD: (Size 55 x 60) # 8edrooms: + # Baths: 25 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab:
(is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) 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: NEW Site plan
Front Minimum 35 Acts 40 (0)
Rear
Rear

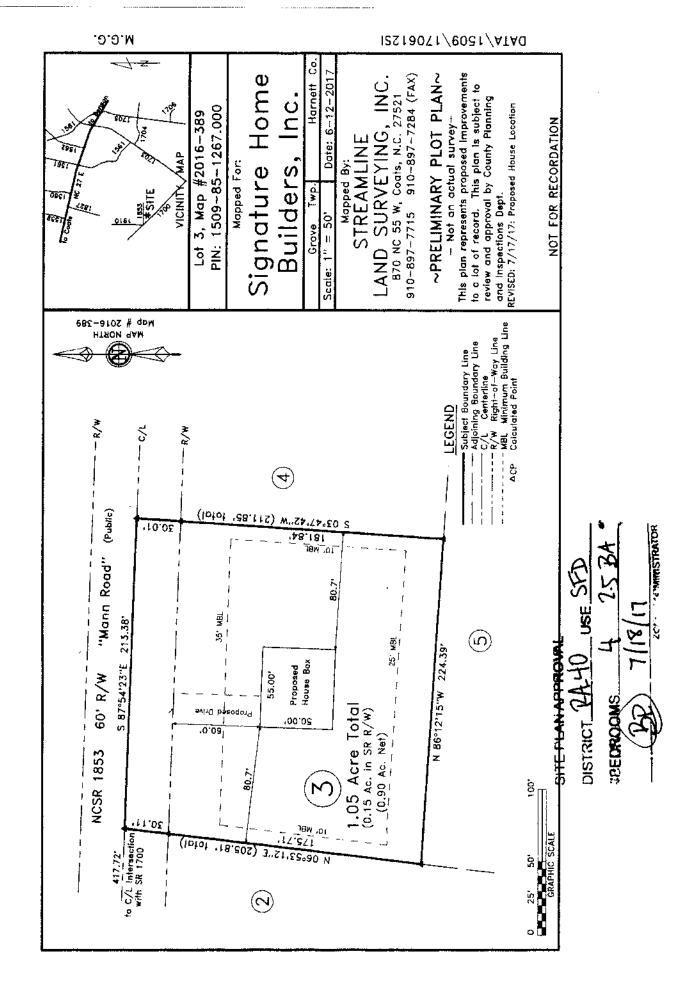
Sidestreet/comer lot_

Nearest Building on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
•	
<u> </u>	
	•
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 knowl	
<u>Ur 8</u>	
Signature of Owner or Owner's Agent	Date

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

^{***}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.***



NAME: APPLICATION #: 41619
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 FTHE 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 pondenumentation submitted. (Compilete site plan = 60 months; Compilete plat = without expiration) 10-893-7525 option 1 11
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.
{
{} 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 (YNO Do you plan to have an <u>irrigation system</u> now or in the future?
YES {L 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 {\(\sum \) 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.
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)