Initial Application Date:_	7/27/2017
Initial Application Date:_	1/2/1/201

Application #	17-50041933
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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.harnett.org/permits
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: Triangle Home Pros LLC Mailing Address: 6312 Lauraca LN
City: Fugual Varing State: NC Zip: 27526 Contact No: 919-346-1528 Email: THPHOMESE GMEIL CO.
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email:
*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Jaff Colver Phone # 919-346-1528
PROPERTY LOCATION: Subdivision: Cokesbury Park Lot #: 67 Lot Size: 079  State Road # 817 State Road Name: Cokesbury Park LN Map Book & Page: 2006 10854  PIN: 0635-68-1635.000 Parket: 050635 012429
State Road # 817 State Road Name: CakeShys V Post 1 N
Parsal 0535-68-1/35 000 Parsal 050635 012426
Zoning: RAsom Flood Zone: X Watershed: CIS Deed Book & Page: 3497 0653 Power Company*:
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
SFD: (Size 47 x 58) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: X Deck: X Crawl Space: X 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
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
Water Supply: 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:
Required Residential Property Line Setbacks: Comments:
Front Minimum 35 Actual 35
Rear <u>25</u> /88
Closest Side 25 19
Sidestreet/corner lot_20 _V/A
Nearest Building N/A

ECIFIC DIRECTIONS TO	R.d - Thea L LN, Around +	on Cokesbury	- Then Lon C	on Cokesbury
Park	LN, Around t	he Loop to 8	17 Coheshory Pa	ikln-
rmite are granted Lagree	to conform to all ordinances and	laws of the State of North Carolin	a regulating cuch work and the	enecifications of plans subsci
eby state that foregoing s	statements are addrate and corre	ect to the best of my knowledge.	Permit subject to revocation if for	alse information is provided.
1	Signature of Owner or Owner	er's Agent	Date	

<sup>\*\*\*</sup>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.\*\*\*

<sup>\*\*</sup>This application expires 6 months from the initial date if permits have not been issued\*\*

NAME: Triangle Home Prosilic

APPLICATION #: 17-50041933

\*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 # 20 123 173

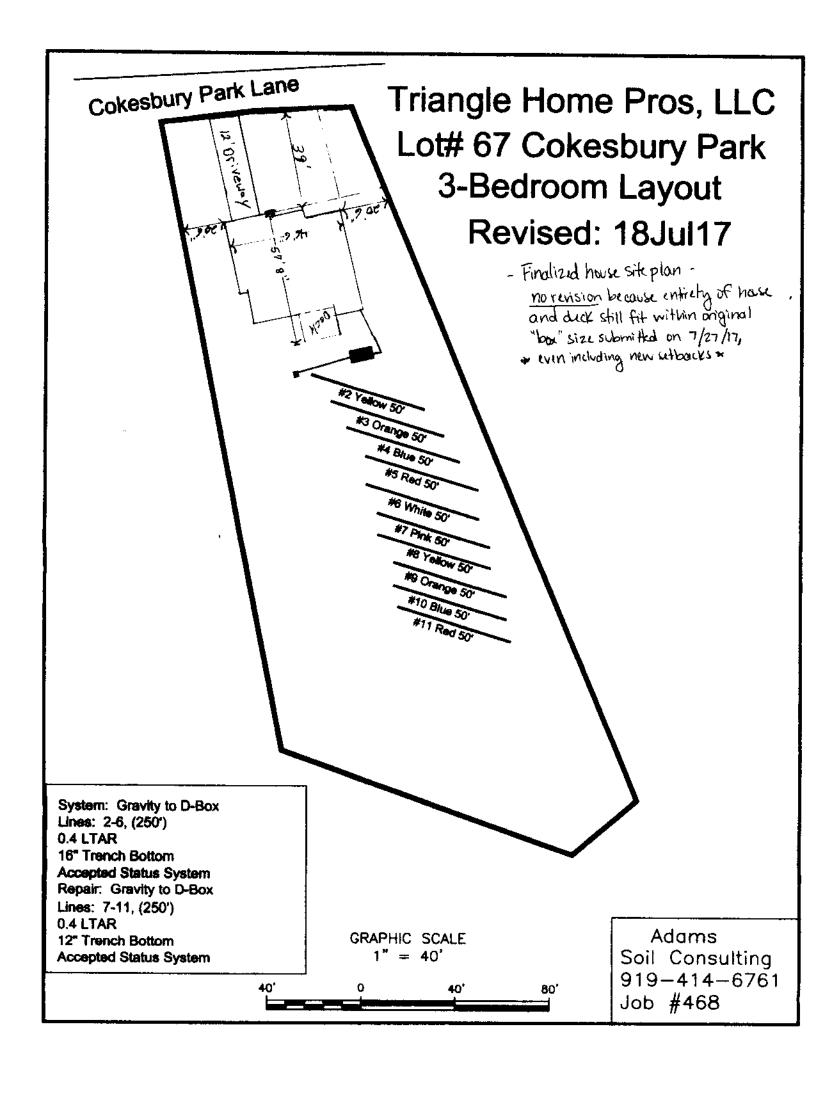
Environmental Health New Septic System Code 800

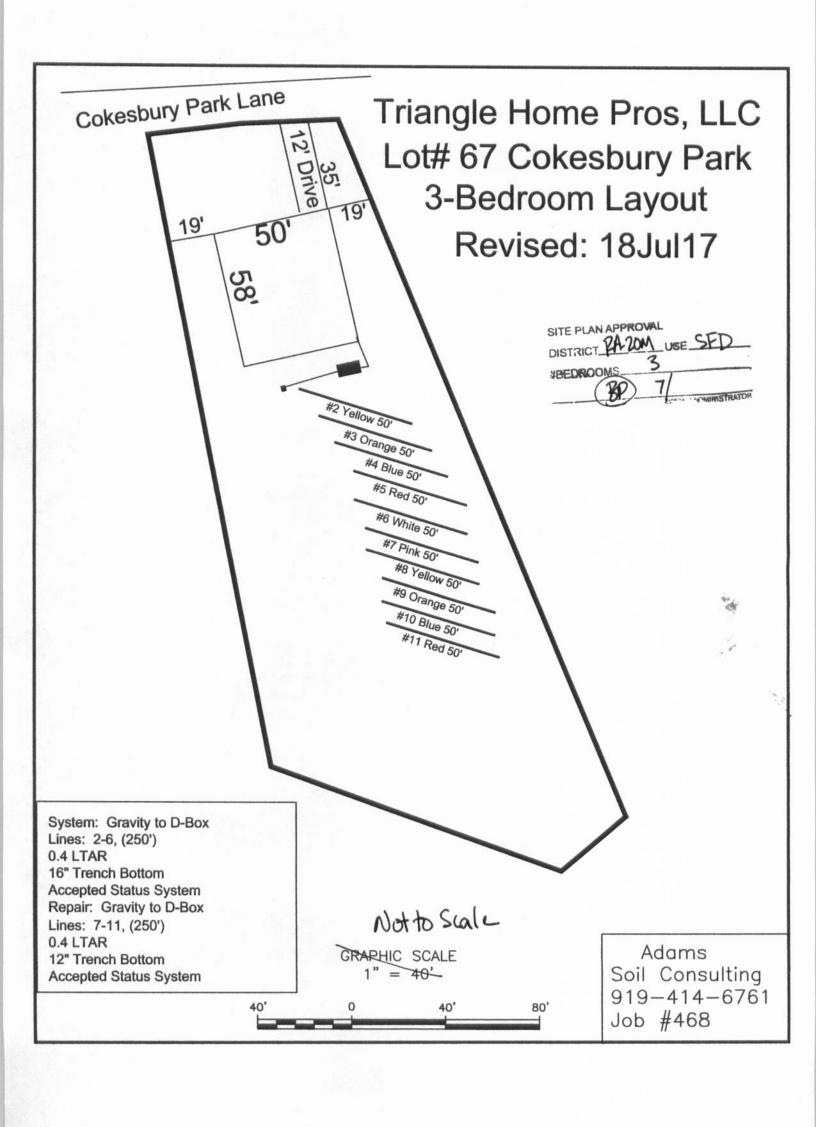
- All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, 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 confirmation number given at end of recording for proof of request.</u>
- 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 authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
ACC		{} Innovative {} Conventional {} Any				
{}} Alte	rnative	{}} Other				
		the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:				
{}}YES	{ <b>≥</b> } NO	Does the site contain any Jurisdictional Wetlands?				
{_}}YES	(X) NO	NO Do you plan to have an <u>irrigation system</u> now or in the future?				
{}}YES	NO 🔀	Does or will the building contain any drains? Please explain				
{}}YES	NO (X)	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{}}YES	{ <b>∑</b> } NO	Is any wastewater going to be generated on the site other than domestic sewage?				
{_}}YES	{ <b>≥</b> } NO	Is the site subject to approval by any other Public Agency?				
{ <b>≥</b> }YES	YES {} NO Are there any Easements or Right of Ways on this property?					
(X)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	d This Applicat	tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And				
State Officia	als Are Grante	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.				
I Understan	nd That I Am S	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making				
		at A Complete Site Evaluation Can Be Performed.  [1] 1/27/20/7				
PROPERT	TV OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE				





## Triangel Home Pros, LLC Lot #67 - Cokesbury Park

3-Bedroom Home (360 gal./day)

LINE #	COLOR	BS	HI	FS	EI EVATION	LINE LENGTH	Design Length
TBM	COLOR	2.0	111	100.0	ELEVATION	in field	installation
INST. 1		2.0	102.0	100.0		III HEIQ	mstanation
1	Pink		102.0	3.7	98.3	50	not used
2	Yellow			3.9	98.1	50	not useu 50
3	Orange			4	98	50	50
4	Blue			4.4	97.6	50	50
5	Red			4.7	97.3	50	50
6	White		-	4.9	97.1	50	50
7	Pink			5.2	96.8	50	50
8	Yellow			5.6	96.4	50	50
9	Orange			5.9	96.1	50	50
10	Blue			6.0	96.1	50	50
11	Red			6.2	95.8	50	
11	Rea				95.8		50
				System Lines 2-6		Repair Lines 7-11	
System Type		Aggam	Accepted Status System		Accepted Status System		
		Accep	EZ-FLOW	ystem Ac	EZ-FLOW	em	
				EZ-FLOW		EZ-FLOW	
Sugg	gested Soil L	TAR		0.40		0.40	
Total Line Length			250		250		
		3					
Square Footage			750		750		
Proposed Trench Bottom			16"		12"		
Distr	ibution Me	thod	S	Gravity to Serial Distribution		Gravity to Serial Distribution	