Initial Application Date:(28/20	2/17
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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

Nearest Building on same lot

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: Milton Built Homes LLC Mailing Address: 3183 US 421 N City: Lillington State: NC Zip: 27546 Contact No: 910. 814. 1012 Email: andrew@miltonbuilthomes. com APPLICANT*: Same as Landowner ___ Mailing Address:___ City: _____ State: ___ Zip: ___ Contact No: ____ Email: ____ Email: _____ CONTACT NAME APPLYING IN OFFICE: Andrew W. Milton Phone # 910.890, 0555 PROPERTY LOCATION: Subdivision: _____ State Road #_____ State Road Name: Olive Branch Road Map Book & Page: 2008 / 0 448 PIN: 0642-98-7077,000 Parcel: 080642 0009 11 Zoning: RA-40 Flood Zone: Watershed: WS-1V-P Deed Book & Page: 3507 / 0874 Power Company*: Duke Energy Progress PROPOSED USE: SFD: (Size 48 x 52) # Bedrooms: 44# Baths: 372 Basement(w/wo bath): Garage: V Deck: V Crawl Space: Slab: Slab: (Is the bonus room finished? ('V') yes (___) no w/ a closet? (V) 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: V 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 (<u></u> no Structures (existing or proposed): Single family dwellings: _____ I _____ Manufactured Homes: _____ Other (specify): ______ Required Residential Property Line Setbacks: Comments: Minimum 35 Actual 90' Front Rear Closest Side Sidestreet/corner lot 20

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 40	11 N toward Fuguay. Left on Christian
light. Rt on Olive Branch. Lot will be on the o	right (1200 Block)
If permits are granted I agree to conform to all ordinances and laws of the State of No I hereby state that foregoing statements are accurate and correct to the best of my known and the state of Owner or Owner's Agent	orth Carolina regulating such work and the specifications of plans submitted. nowledge. Permit subject to revocation if false information is provided.

^{***}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**

APPLICATION #: 42142

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			
TE THE INFORMATION IN THIS APPLICATION IS FAI SIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT			
The permit is valid for either 60 months or Without EXDITATION			
depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 910-893-7525 option 1 CONFIRMATION #			
Fourteenmental Health New Sentic SystemCode 800 X 129 11 1			
• 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. 			
Discourse and a least the cord in location that is easily viewed from road to assist in locating properly.			
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. <i>Do not grade property.</i>			
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			
Eallow above instructions for placing flags and card on property.			
Brenare for increation by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (II			
possible) and then put lid back in place . (Unless inspection is for a septic tank in a mobile nome 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			
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 <u>irrigation system</u> 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 { \(\sum_{\} \)} 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			

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)

08/29/17 DATE

