

Initial Application Date: 12/7/17

Application # 1750042878

CU# _____

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****

Robert: SU

LANDOWNER: Wellons Realty Inc. Mailing Address: P.O. Box 730

City: Dunn State: NC Zip: 28335 Contact No: 910-263-0310 Email: dstephenson@wellonsrealty.com

APPLICANT*: Wellons Realty Inc. Mailing Address: P.O. Box 730

City: Dunn State: NC Zip: 28335 Contact No: 910-263-0310 Email: dstephenson@wellonsrealty.com

CONTACT NAME APPLYING IN OFFICE: Duane Stephenson Phone # 910-263-0310

PROPERTY LOCATION: Subdivision: Oxford Woods, 583AC Map# 2008-214 Lot #: 34 Lot Size: .58 Acres

State Road # 54 State Road Name: Eaton Dr. Map Book & Page: 2008, 214

Parcel: 040692 0017 29 PIN: 0682-89-8090, 0000

Zoning: RA30 Flood Zone: X Watershed: NO Deed Book & Page: 3513, 251 Power Company*: _____

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

PROPOSED USE:

SFD: (Size 60 x 45) # Bedrooms: 3 # Baths: 2 Basement (w/wo bath): _____ Garage: Deck: Crawl Space: Slab: _____ 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): _____

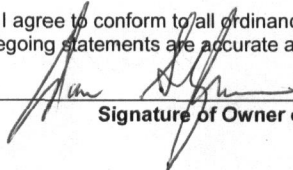
Required Residential Property Line Setbacks:

Front Minimum 35 Actual 40
Rear 22 230
Closest Side 10' 19.8
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: leave lillington going east on
421 turn left onto Old Stage rd. go straight, cross over
55 Hwy turn left into Oxford Woods go to
Eaton Dr. turn right 3rd lot on right

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

12-7-17
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: Wellons Realty Inc

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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

12-7-17
DATE

DEED REFERENCE:

Deed Book 3513, Page 251
Map # 2008-214

ZONED: R-30

MINIMUM SETBACK REQUIREMENT

Front -----35'
Side-----10'
Rear-----22'

LEGEND:

FIP.....Found Iron Pipe
CP.....Computed Point
*.....Control Corner
FRB.....Found Rebar

**SITE PLAN FOR:
ROBERT P. WELLONS
P.O. Box 730, Dunn NC 28335
OXFORD WOODS SUBDIVISION
PHASE 1, LOT 34**

BLACK RIVER TWP HARNETT CO NC

DECEMBER 7, 2017

0 60 120 180



1" = 60'

PIN: 0682-89-8090.000 PID: 040692 0017 29

LINE LEGEND:

Subject Tract Surveyed
Lines Not Surveyed
Setback Line
Surveyed Lines, R/W or Tie Line
Not to Scale

ORIGINAL SIGNED AND SEALED

on December 7, 2017 by

J. SCOTT WALKER, PLS

835 ABATTOIR RD, COATS NC 27521
(910) 897-5753

This is Not to Be Considered
a Certified Document

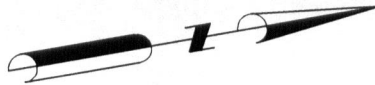
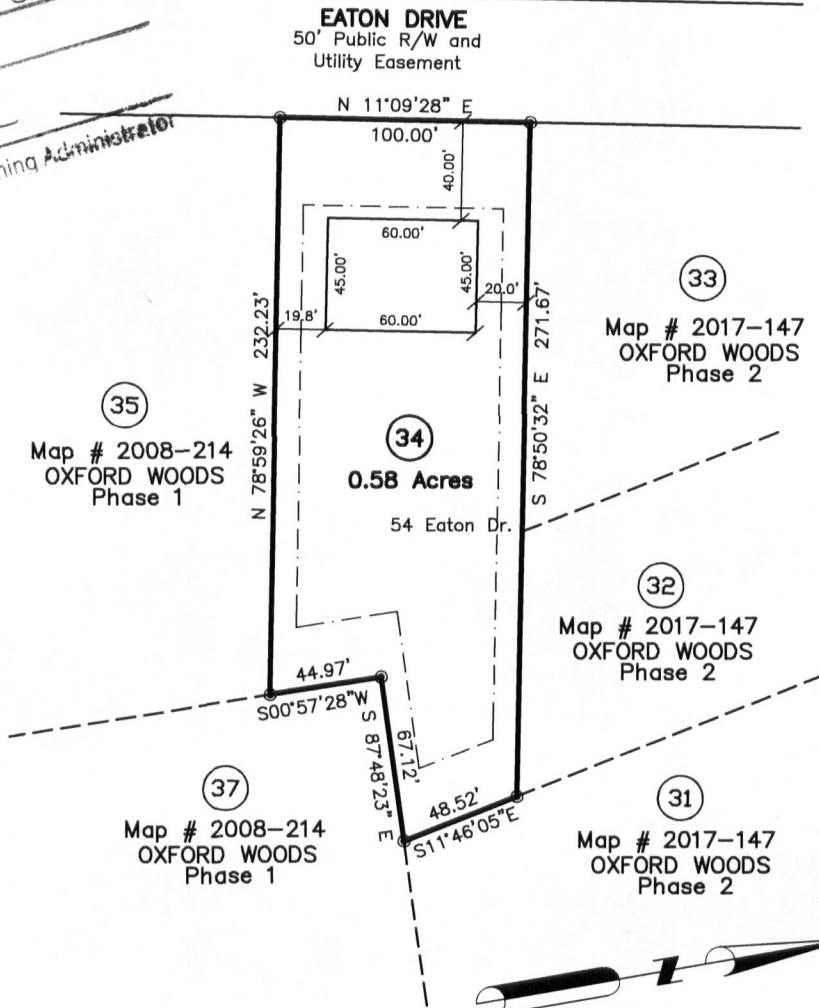
SITE PLAN APPROVAL

DISTRICT RA-30

#BEDROOMS

12/7/17

USE SFD
3
Zoning Administrator



HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
Date: 12/07/17 53 Receipt no: 175641

Year	Number	Amount
2017	53042877	
91730	TECH 3	
LILLINGTON, NC	27546	
B4	BP - ENV HEALTH FEES	
		\$750.00
NEW SEPTIC		

WELLONS REALTY, INC.

Tender detail		
CK CHECK PAYMEN	23444	\$750.00
Total tendered		\$750.00
Total payment		\$750.00

Trans date: 12/07/17 Time: 12:01:46

** THANK YOU FOR YOUR PAYMENT **