Initial Application Date:	1	19	Ŀ	8	
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Application #	18-5004306	
	CU#	

Central Permitting

on same lot

Residential Land Use Application

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 FOR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" LANDOWNER: Steven E. Haskins & Paggy J. Haskins Malling Address: 1130 Newport Way State: CA Zip: 9566 Contact No: APPLICANT: Signature Home Builders Mailing Address: 1209 N. Main St. City: Lillington State: NL Zip: 27546 Contact No: 910-892929 Email: Csherrod, Shop amul, een *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Chrs Shewd Phone # 910-985-1136 PROPERTY LOCATION: Subdivision: State Road # 1238 State Road Name: Spyring 1411 (hurch 12). Map Book & Page: 2017 / 455

Parcel: 130519 0042 02 PIN: 0620-10-0394,000

Zoning: RA-30 Flood Zone: X Watershed: NO Deed Book & Page 3550 / 17 Power Company*: Duke Suggy *New structures with Progress Energy as service provider need to supply premise number. _____ from Progress Energy. PROPOSED USE: SFD: (Size 71 x 53) # Bedrooms: 4 # Baths: 2.5 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 sits 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? ($\underline{}$) yes. ($\underline{}$) no Does the property contain any easements whether underground or overhead (\checkmark) yes $\langle \ldots \rangle$ no Structures (existing of proposed): Single family dwellings: Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Minimum 35 Actual 524.18 Emnt Rear Closest Side Sidestreet/comer lot Neerest Building

SPECIFIC DIRECTIONS TO THE	PROPERTY FROM LILLINGTO	N: Take Old US 4	121 towards Man	1005
From Lillington House will be	on left Aprox	anto Spring (ti)	1 Chuch Rd.	
	700			
			774.1	
if permits are granted I agree to co	onform to all ordinances and laws ments are accurate and correct to	of the State of North Carolina re- the best of my knowledge. Pern	gulating such work and the specification if false infor	stions of plans submitted mation is provided.
	Signature of Owner or 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:	APPLICATION #: 18-5004306
County Health De	*This application to be filled out when applying for a septic system inspection.*
IF THE INFORMATION IN	PPARTMENT Application for Improvement Permit and/or Authorization to Construct This Application is falsified, Changed, or the site is altered, then the improvement
PERMIT OR AUTHORIZA	TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either of months or without as pirarion.
depending upon documentati	ion submitted. (Complete site plan = 60 months; Complete plat = without expiration)
/ 910-893-7525 c	option 1 CONFIRMATION # $\frac{167}{19}$ (1/2) $\frac{19}{19}$
	alth New Septic SystemCode 800
 All property in 	ons must be made visible. Place "pink property flags" on each corner iron of lot. All property
lines must be c	learly flagged approximately every 50 feet between corners.
 Place "orange ! 	nouse corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks
out buildings, s	wimming pools, etc. Place flags per site plan developed at/for Central Permitting.
 Place orange E 	nvironmental Health card in location that is easily viewed from road to assist in locating property.
 If property is th 	ickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soi
evaluation to be	performed. Inspectors should be able to walk freely around site. Do not grade property.
 All lots to be a 	ddressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
<u>tor tailure to u</u>	ncover 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 (aπer selec	ting notification permit if multiple permits exist) for Environmental Health inspection. Please note
	mber given at end of recording for proof of request.
	or IVR to verify results. Once approved, proceed to Central Permitting for permits.
	alth Existing Tank Inspections Code 800
Follow above in	structions for placing flags and card on property.
• Frepare for itis	pection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (ii
• DO NOT I FAVE	en put lid back in place. (Unless inspection is for a septic tank in a mobile home park) LIDS OFF OF SEPTIC TANK
	g outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
if multiple perm	nits, then use code 800 for Environmental Health inspection. Please note confirmation number
	recording for proof of request.
	or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
<u>SEPTIC</u>	
If applying for authorizatio	n 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 question. If the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES {}}NO	Does the site contain any Jurisdictional Wetlands?
{_})YES {_ _ }NØ	Do you plan to have an irrigation system now or in the future?
	Does or will the building contain any drains? Please explain.
	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?

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.

ls any wastewater going to be generated on the site other than domestic sewage?

Does the site contain any existing water, cable, phone or underground electric lines?

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Is the site subject to approval by any other Public Agency?

Are there any Easements or Right of Ways on this property?

