	101	18
Initial Application Date:	(0/	1 0

Application #	1850043264	
	CU#	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

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: Lamco Custom Builders, LLC Mailing Address: 7424 Chapel Hill Rd Ste 203 City: Raleigh Contact No: 919-307-4254 Email: lamcocutombuilders@gmail.cor APPLICANT*: Mailing Address: City: ____ State: ___ Zip: ___ Contact No: ____ Email: ____ *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Tony Toro PROPERTY LOCATION: Subdivision: Currin Plantation State Road Name: Southern Place _____ Map Book & Page: 2010 / (, 18 State Road # 96 Parcel: 130527 0012 03 Watershed: NO Deed Book & Page: 3550 / 924 Power Company*: Duke *New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: SFD: (Size <u>6 x 35</u>) # Bedrooms: <u>3</u> # Baths: <u>2</u> Basement(w/wo bath): ___ Garage: <u>\(\lambda \)</u> Deck: ___ Crawl Space: <u>\(\lambda \)</u> Slab: ___ (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms) (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: 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 (\leftilde{\shi}) no Does the property contain any easements whether underground or overhead (__) yes (\checkmark) no Structures (existing or proposed): Single family dwellings: $\underline{\underline{\hspace{1cm}}}^{\text{New Home}}$ Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: 35 Actual O Front 25' Rear 10' Closest Side Sidestreet/corner lot Nearest Building

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	Take NC-27 W to Norrington Rd turn left onto Norrington Rd,	
turn right onto Clark Rd to southern Place on the left.		
If permits are granted I agree to conform to all ordinances and laws of I hereby state that foregoing statements are accurate and correct to the	the State of North Carolina regulating such work and the specifications of plans submitted e best of my knowledge. Permit subject to revocation if false information is provided.	
and the same of th	1/22/18	
Signature of Owner or Owner's Ag	ent 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: Lamco Custom Builders, LLC	APPLICATION #:	
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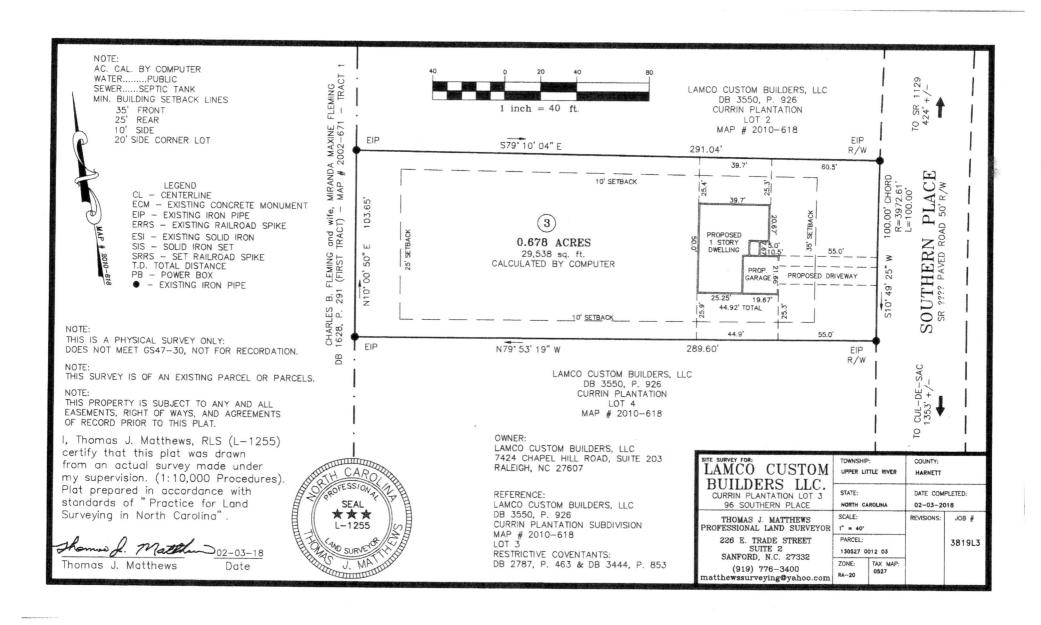
		This application to be filled out when applying for a septic system inspection.
Coun	ty Health D	epartment Application for Improvement Permit and/or Authorization to Construct
IF THE IN	FORMATION II	N THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED. THEN THE IMPROVEMENT
PERMIT O	R AUTHORIZA	ATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration
depending	upon documenta 10-893-7525	tion submitted. (Complete site plan = 60 months; Complete plat = without expiration)
		option 1 CONFIRMATION #ealth New Septic SystemCode 800
		rons must be made visible. Place "pink property flags" on each corner iron of lot. All property
lii	nes must be d	clearly flagged approximately every 50 feet between corners.
• P	lace "orange	house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks.
0	ut buildings, s	swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
• P	lace orange l	Environmental Health card in location that is easily viewed from road to assist in locating property.
• 11	property is tr	nickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil be performed. Inspectors should be able to walk freely around site. Do not grade property .
• 4	Il lots to be	addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
fo	or failure to u	uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
• A	fter preparing	proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code
8	00 (after sele	cting notification permit if multiple permits exist) for Environmental Health inspection. Please note
<u>C</u>	onfirmation nu	umber given at end of recording for proof of request.
• U • Envii	se Click2Gov	or IVR to verify results. Once approved, proceed to Central Permitting for permits.
• E	ollow above i	nstructions for placing flags and card on property.
• P	repare for ins	spection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if
p	<i>ossible</i>) and t	hen put lid back in place. (Unless inspection is for a septic tank in a mobile home park)
• D	O NOT LEAVE	ELIDS OFF OF SEPTIC TANK
• A	fter uncoverir	ng outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
a a	multiple peri	mits, 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.
SEPTIC		
		on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
		$\{\underline{\hspace{0.1cm}}\}$ Innovative $\{\underline{\hspace{0.1cm}}'\}$ Conventional $\{\underline{\hspace{0.1cm}}\}$ Any
{}} Alte	ernative	{}} Other
The applic	ant 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	{ <u>✓</u> } 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	{ <u>✓</u> } 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 Rea	d This Applicat	ion 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)

1/22/18
DATE



HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

LINOS Type: CP Draw

Oper: LLUCAS Type: CP Drawer: 1 Date: 2/08/18 53 Receipt no: 245324

Year Number Amount 2018 50043269 91750 TECH 3 LILLINGTON, NC 27546 B4 BP - ENV HEALTH FEES \$750.00

NEW SEPTIC

LAMCO CUSTOM BUILDERS

Tender detail
CK CHECK PAYMEN 4843 \$750.00
Total tendered \$750.00
Total payment \$750.00

Trans date: 2/08/18 Time: 15:24:40

** THANK YOU FOR YOUR PAYMENT **