терии Date: 2/22/18
County of Harnett residential Land use application # COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION **A RECOrder Supplies Use of the County of Harnett Residential Land use application # CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Phone: (910) 893-7525 ext. 2
TAX. 1010) 000 000
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION LANDOWNER: (910) 893-2793 www.harnett.org/permits LANDOWNER: (910) 893-2793 www.harnett.org/permits
City: Rae ford Mailing Address: 256 Brior Hill RJ.
State: NC Zip: 28376 Contact No: 910 -988-8177 Email: 5 Course Contact No:
LANDOWNER: Precision (ustam Homes and Renovation), LL (City: Rae ford State: NC Zip: 28376 Contact No: 910-988-8177 Email: Shave precision properties of Mailing Address: Mailing Address: Mailing Address:
City: State: Zip: Contact No: Email:
CONTACT NAME APPLYING IN OFFICE: Shaw Gardier
PROPERTY LOCATION: Subdivision: SUMMPRIM
State Road # 760 State Road Name: Apache Trail Parcel: Pln: 099567 0054 3 6 Zoning: RA-70M Flood Zone: V Western 1860 10 2444 244
Parcel: 9507-93-4175000 (A) A A A A A A A A A A A A A A A A A A
Zoning: RA-70M Flood Zone: Watershed: WNO Deed Book & Page: 3499, 319 Power Company*: (entral EM (
New structures with Progress Energy as services. Watersned: W. I.V. Deed Book & Page: 3479 / 319 Power Company: (entral L'M(
*New structures with Progress Energy as service provider need to supply premise numberfrom Progress Energy.
PROPOSED USE:
SFD: (Size 60 x 96) # Bedrooms: 9 # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: 1 Monolithic Slab: 1 Monolit
(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:
Hame Occupation: # Rooms:Use:Hours of Operation:#Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
Nater 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
oces owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes (\(\frac{1}{2}\)) no
oes 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: Comments: Please see attached report from Soil
ront Minimum 35 Actual 36 Scientest
Rear 25 88
Closest Side 10 .33
Sidestreet/corner lot
learest Building 10
n same lot Residential Land Use Application Page 1 of 2

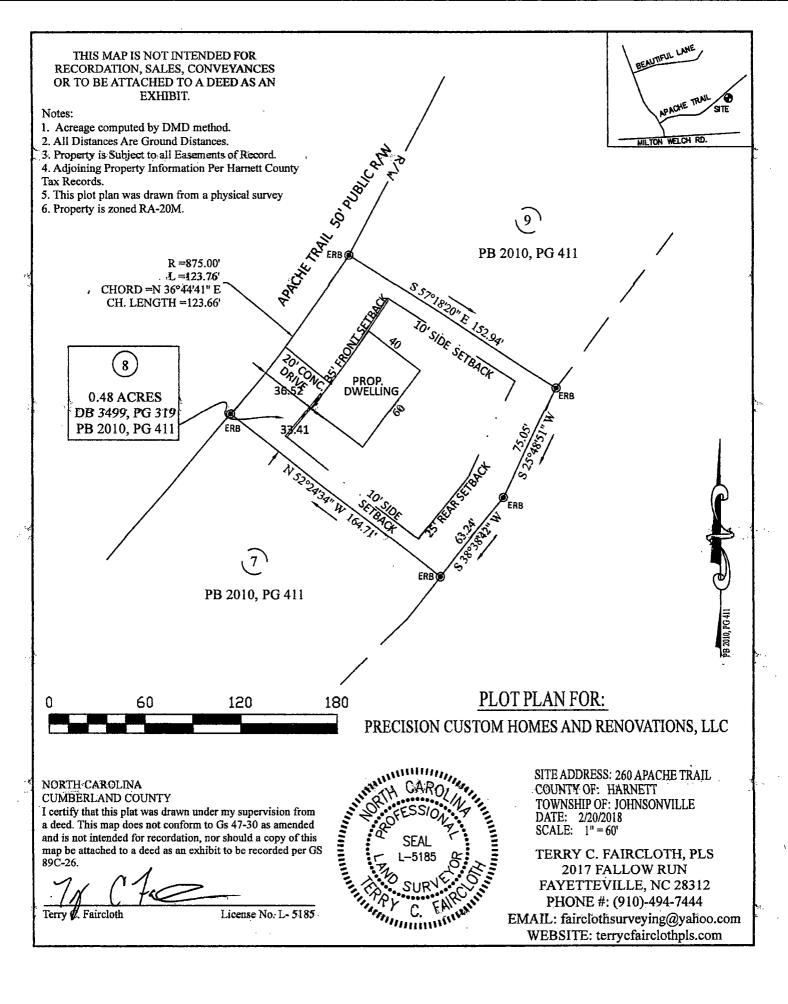
Page 1 of 2
APPLICATION CONTINUES ON BACK

03/11

0.0	0,0	<u></u>	ሀጣሲ	erly	1			2 00	_Ара	the.	<u>İsarl</u>						 .	
	· 								٠, :	, .	<u>., .</u>	-						_
																		
									-	·- · ·								_
onfo	onform	m to a	all ordin	nance	es and	d laws	of the	State	of North	Carolin	a regula	ting eur	h worl	and th	o coool	fination	of plan	
	ments	s are a	accura	ite and	d con	rect to	the be	est of n	ny know	ledge.	Permit s	ubject to	revo	ation if	e speci false in	ncalions	on is pro	ovided.
meni		1/	$\tilde{\Box}$					UI II	.,	.oug	٠.	o. I omine a	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	5/2/12	>/>//	>/r///	>/7/11	e. Permit subject to revocation if false information is pro

^{***}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:	Shaun	Cardner / Precision	(ustum	Homes + Non	_{lou} atlurs APPLICA	ATION #:	15-50043381
·		*This application to b					
IF THE I	NFORMATIO OR AUTHOR g upon docum	n Department Application I	ation for I S FALSIFIED SHALL BEC	mprovement D, CHANGED, OF COME INVALID	Permit and R THE SITE IS A The permit is v	I/or Author ALTERED, Totalid for either	orization to Construct THEN THE IMPROVEMENT of 00 months or without expiration
n En		l Health New Septic Sy.	stemCode	800	COMING	IAIION "_	400
•	All proper lines must I Place "orar out building Place oran If property evaluation to All lots to	ty irons must be made be clearly flagged approv- age house corner flags" a s, swimming pools, etc. ge Environmental Health is thickly wooded, Enviro to be performed. Inspec-	e visible. P timately event t each corn Place flags card in loca tomental He tors should business	lace "pink propery 50 feet between of the propers per site plan cation that is easealth requires the able to wall days after could be able to wall days after the able to wall days after the able to wall days after could be able to wall days after the able	veen corners. bsed structure developed at/f sily viewed fro hat you clean k freely aroun nfirmation. \$	e. Also flag for Central om road to n out the <u>un</u> d site. Do i	assist in locating property. ndergrowth to allow the soil not grade property. rn trip fee may be incurred
•	After prepa 800 (after s	ring proposed site call the selecting notification per	e voice per nit if multipl	mitting system le permits exis	at 910-893-7 t) for Environ	525 option	1 to schedule and use code alth inspection. Please note
•	confirmatio Use Click20 vironmenta Follow abov Prepare for possible) as DO NOT LE	n number given at end of Gov or IVR to verify result Health Existing Tank I be instructions for placing inspection by removing that then put lid back in paye Libs of SEPTIO	recording to lts. Once a lnspections glags and of grown soil over of lace. (Unle	for proof of req pproved, proce Sode 800 card on proper butlet end of the ess inspection is	uest. eed to Central ty. tank as diagr s for a septic	Permitting am indicat tank in a m	of for permits. The ses, and lift lid straight up (if nobile home park)
•	if multiple given at en	ering outlet end call the permits, then use code <u>d of recording for proof o</u> Gov or IVR to hear result	800 for En frequest.	vironmental H	ealth inspect	ion. <u>Please</u>	8 select notification permit e note confirmation number for remaining permits.
<u>SEPTIC</u>	1	-			•	-	
If applyi	ng for authori	zation to construct please in	^			in order of pr	reference, must choose one.
	ccepted	. {}} Innovative					
{}} A	lternative	{}} Other			·		
The appl question	icant shall no If the answ	otify the local health depart er is "yes", applicant MUS	ment upon su T ATTACH	abmittal of this a	ipplication if and G DOCUMEN	ny of the fol ITATION:	llowing apply to the property in
{}}YE	$S = \{\underline{\lambda}\}$ NO	Does the site contain	any Jurisdict	ional Wetlands?	ı		•
{}}YE	$S = \{ \underline{\lambda} \}$ NO	Do you plan to have a	ın <u>irrigation s</u>	system now or in	the future?		
{}}YE	S { <u>X</u> } NO	Does or will the build	ing contain a	any drains? Pleas	se explain		
{}}YES	(<u>X</u>) NO	Are there any existing	wells, sprin	gs, waterlines of	r Wastewater S	systems on t	his property?
{}}YE	$S = \{\underline{X}\}$ NO	Is any wastewater goi	ng to be gene	erated on the site	e other than do	mestic sewa	ige?
{}}YE	• •	-	pproval by a	ny other Public .	Agency?		
{}}YE					_		
{}}YE		•		-		ound electri	c lines?
·—,	\—	If yes please call No	•	_	_	•	
I Have R	ead This App	· -					Correct. Authorized County And
							ith Applicable Laws And Rules.
							nes And Corners And Making
The Site	Accessible So	That A Complete Site Evalu	ation Can Be	Performed.			81115

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

	SUBDIVISION: Summerlin Gravity INITIAL SYSTEM: APPROVED 25% RECUCTION	LOT & Cravity REPAIR Approved 25% Reducti DISTRIBUTION Serial							
	DISTRIBUTION: D- Box								
	BENCHMARK: 100.0	LOCATION FC Lot 8/7 Iron							
	NO. BEDROOMS: 4	LTAR	0.4 694/F12						
	LINE FLAG COLOR	ELEVATION	LENGTH						
<	В	96.42	100						
I/	2 V	95.84	100						
	3 B	95.09	100						
			300						
/	, U	94.42	100'						
, 5	5 8	93,59	100						
43	6 W	93,17	50						
	7 ß	92.67	50						
			300						
	BY B.C. Raynor		DATE 05/07/2017						
	. /		THERE SHALL BE NO GRADING,						
	TYPICAL PROFILE								
	U-22 LS fri gran		CUTTING, LOGGING OR OTHER SOIL						
	22-40 SCL Firm SBK		DISTURBANCE IN SEPTIC AREA						
	0-22 LS Frigran 22-40 SCL firm SBK er 2 @ 301.	•	ANY DISTURBANCEMAY CAUSE A SITE						
			TO RECOME LINSUITABLE						

