| Initial | Application | Date: | Ц | L | \mathcal{L}^{\parallel} | 8 |
|---------|-------------|-------|---|---|---------------------------|---|
| | • - | | | | | , |

| Application # | 1850043774 |
|---------------|------------|
| | 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" |
|--|
| LANDOWNER: Precision Custom Homes and Renovation) Mailing Address: 256 Brigs Hill Rd. |
| City: Rueford State: NC Zip: 28376 Contact No: 910-988-8172 Email: Shaun@precision.properties.nc.fo |
| APPLICANT*: Mailing Address: |
| City: State: _ Zip: Contact No: Email: *Please fill out applicant information if different than landowner |
| CONTACT NAME APPLYING IN OFFICE: Shown Gardner Phone # 910 - 988 - 8172 |
| PROPERTY LOCATION: Subdivision: Summerin Lot #: 24 Lot Size: . 49 acre |
| State Road # 90 State Road Name: Beauliful lone Map Book & Page 2017, 338 |
| State Road # 90 State Road Name: Beau lifu lane Map Book & Page 2017, 338 Parcel: 09 9567 0054 52 PIN: 9567 -88 - 7529.000 |
| Zoning: RA-ZoM Flood Zone: X Watershed: NA Deed Book & Page: 3499 / 319 Power Company: Central EMC |
| *New structures with Progress Energy as service provider need to supply premise number from Progress Energy. |
| PROPOSED USE: |
| B SFD: (Size 60 x 50) # Bedrooms: 4 # Baths: Sasement(w/wo beth): Garage: Deck: Crawl Space: Slab: Sla |
| (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms) |
| ☐ Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?) |
| Duplex: (Sizex) No. Suildings:No. Bedrooms Per Unit: |
| Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees: |
| Addition/Accessory/Other: (Sizex) 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: Comments: |
| Front Minimum 35 Actual 35.7 |
| Rear 25 30' |
| Closest Side 10 11.9 |
| Sidestreet/corner lat |
| Nearest Building on same lot |

| SPECIFIC DIRECTIONS TO THE PROPERTY | FROM LILLINGTON: | 77 West Ron | 87 N L on |
|---|---------------------------------------|--|--|
| Milton Wel | | Right on summer! | in Dr. Ron Beautiful long |
| 2nd lot on Rig | h [†] | | |
| · · · · · · · · · · · · · · · · · · · | | | |
| | | | |
| | | | |
| | - / | | |
| f permits are granted I agree to conform to all o | ordinances and laws of the State of N | North Carolina regulating such work | and the specifications of plans submitted. |
| hereby state that foregoing statements are acc | Down | criowledge. Permit subject to revoc 4 1 1 | ation it raise information 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

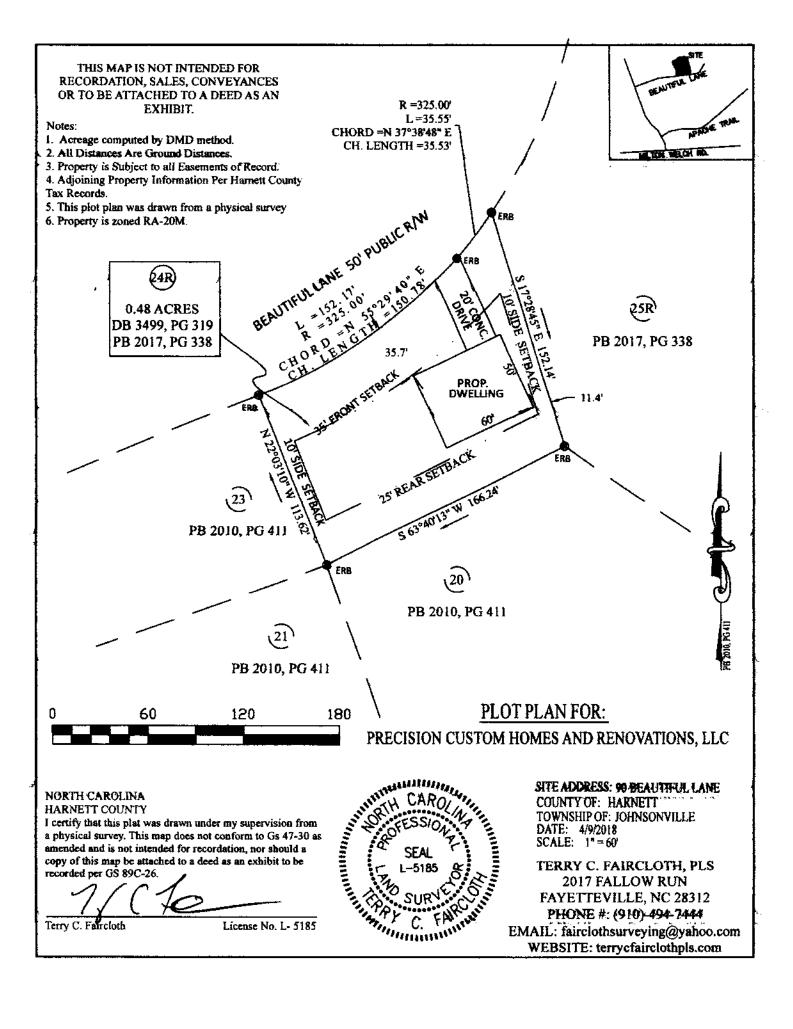
| NAME: Precisi | iun (ustum Humes + Renoughluns APPLICATION#: |
|---|--|
| | *This application to be filled out when applying for a septic system inspection.* |
| County He | alth Department Application for Improvement Permit and/or Authorization to Construct |
| IF THE INFORMA PERMIT OR AUTI depending upon do | ATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT HORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration cumentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 3-7525 option 1 CONFIRMATION # |
| <u>Environme</u> | ntal Health New Septic SystemCode 800 |
| • All pro | perty Irons must be made visible. Place "pink property flags" on each corner iron of lot. All property ust be clearly flagged approximately every 50 feet between corners. |
| Place "o | prange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks. |
| out build | lings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. |
| If proper | range Environmental Health card in location that is easily viewed from road to assist in locating property. rty is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil on 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 |
| After pre 800 (after confirms Use Clic Follow a Prepare possible | paring proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code or selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note ation number given at end of recording for proof of request. Ex2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits. Intai Health Existing Tank inspections. Code 800 above instructions for placing flags and card on property. If or inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park) LEAVE LIDS OFF OF SEPTIC TANK |
| ır multip given at | covering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit le permits, then use code 800 for Environmental Health inspection. <u>Please note confirmation number end of recording for proof of request.</u> k2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits. |
| If applying for aut | horization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. |
| {}} Accepted | |
| {}} Alternative | {}} Other |
| The applicant shal | I notify the local health department upon submittal of this application if any of the following apply to the property in swer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION: |
| $YES {X \over i}$ | |
| $YES {\frac{\lambda}{\lambda}}$ | NO Do you plan to have an <u>irrigation system</u> now or in the future? |
| $_{1}$ YES $\{\underline{\lambda}\}$ | |
| }}YES { <u>→</u> } | |
| $_{}$ YES $\{\underline{\lambda}\}$ | T By the state of |
| $_{1}$ YES $\{\overline{\lambda}\}$ | O TO TO THE OTHER DATE OF THE CONTROL OF THE CONTRO |
| }YE\$ { <u>X</u> }: | The state of the s |
| $YES \{ \frac{\sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^$ | part of the property. |
| | Promote and a street of the st |
| Hove Beed This 4 | If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. |
| LATE ACAU INS A | application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And |

I. 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)

4/10/18



SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

| PROPOSED SUBSURFACE WASTE D | DISPOSAL SYSTEM DETAIL SHEET |
|-----------------------------|------------------------------|
|-----------------------------|------------------------------|

| | SUBDIVISION: Summer lin | LOT | 24 | | | |
|------------|--|---------------------|---------------------------------|--|--|--|
| | INITIAL SYSTEM: APPROVED 25% RECUCTION | REPAIR | Pump to Approved 25% Reduction | | | |
| | DISTRIBUTION: Secial | DISTRIBUTION Serial | | | | |
| | BENCHMARK: 100.0 | LOCAT | ION BC Lc+ 24/20/21/23 | | | |
| | NO. BEDROOMS: | <u>LTAR</u> | 0.3 600/00 | | | |
| | LINE FLAG COLOR | ELEVATION | LENGTH | | | |
| (| <i>()</i> | 48.33 | 40 | | | |
| τ. |) 2 | 97.75 | 60 | | | |
| ۱ ۲ | 3 g - 4a Y | 97.17 | 80 | | | |
| į | - 4a Y | 96.59 | <u>uo</u> | | | |
| | | | 220 | | | |
| <u>,</u> (| Чь | 96.59 | 40 | | | |
| /r - | γ 4b γ 5 β | 96.68 95.59 | 100 | | | |
| į | 6 7 | 95.54 | <u>80</u> 220 | | | |
| | | | <i>DD0</i> | | | |
| | | | | | | |
| | | | | | | |
| | BY B.C. Rayner | | DATE 05/02/2017 | | | |
| | TYPICAL PROFILE | | THERE SHALL BE NO GRADING, | | | |
| | 2-42+ 6/ /. | | CUTTING, LOGGING OR OTHER SOIL | | | |
| | P. 1 1115 | | DISTURBANCE IN SEPTIC AREA | | | |
| | | | ANY DISTURBANCEMAY CAUSE A SITE | | | |
| | | | TO BECOME UNSUITABLE | | | |

