nitial Application Date:	4/27	1	18	
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Application # _	18500t	1389	4	R

nitial Application Date: 4/27/18 Application # 185604389 4 R
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**
City: Fugury - VARIM State NC Zip: 275 Bontact No: 917-868 6460 Email: JASON OTA HONS META 1. COM
City: Fugury - Varin State NC zip: 275 Bontact No: 919-868-6460 Email: JASON OTA HONS META 1. Com
APPLICANT*: DCN.(U_V)CANNO Mailing Address: 125 River Rd  City: FUQUAL VOVING StateNC zip27529 Contact No.919 XUX-4913-mail:
CONTACT NAME APPLYING IN OFFICE: Daniel Lancanna Phone # 919-868-4923  LOTTE JAR  PROPERTY LOCATION: Subdivision: Damon WOOdall Mgott 217-194  Lot #: Lot Size: 4127
PROPERTY LOCATION: Subdivision: La MOT WOOd all Nagot July Lot #: Lot Size: 412
State Road # 1441 State Road Name: Chalybeate Springs Rd Map Book & Page: 2017, 194  Parcel: 040 (264 0100 05 PIN: 0464-53-875 1.000
Zoning: RA-30 Flood Zone: X Watershed: WS-IV Deed Book & Page; 3543 / 29   Power Company*:
New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:  SFD: (Size 94x70) # Bedrooms: # Battis: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
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. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Size) 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 Actual 22
Rear 25+
Closest Side 124.9
Sidestreet/corner lot

Residential Land Use Application

Nearest Building on same lot

PECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 NORTH RIGHT ON CHAYBEATE RC 1.75 miles LEFT on Woodcannow DR BARN WILL BE ON LEF	Sp
Re 1.75 miles LEFt on Woodcannon DR BARN WILL BE ON LEF	+
	les - d
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 submithereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.	itted.
Signature of Owner or Owner's Agent Date	
Signature of Owner or Owner's Agent Date	

<sup>\*\*\*</sup>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.\*\*\*

<sup>\*\*</sup>This application expires 6 months from the initial date if permits have not been issued\*\*

NAME:	APPLICATION #: 4389 Q				
	*This application to be filled out when applying for a septic system inspection.*				
County Health De	Partment Application for Improvement Permit and/or Authorization to Construct NTHIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration ion submitted. (Complete site plan = 60 months; Complete plat = without expiration)				
910-893-7525 (	option 1 CONFIRMATION # Od 7430-U				
<ul> <li>All property in</li> </ul>	rons must be made visible. Place "pink property flags" on each corner iron of lot. All property flagsed approximately every 50 feet between corners.				
<ul> <li>Place "orange l</li> </ul>					
<ul> <li>Place orange E</li> </ul>	invironmental Health card in location that is easily viewed from road to assist in locating property.				
<ul> <li>If property is the evaluation to be</li> </ul>	cickly 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. <b>Do not grade property</b> .				
All lots to be a	addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred				
After preparing	proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code				
800 (after select	cting notification permit if multiple permits exist) for Environmental Health inspection. Please note umber given at end of recording for proof of request.				
	or IVR to verify results. Once approved, proceed to Central Permitting for permits.				
Environmental He	ealth Existing Tank Inspections Code 800				
<ul> <li>Follow above in</li> </ul>	nstructions for placing flags and card on property.				
Prepare for ins	spection by removing soil over <b>outlet end</b> of tank as diagram indicates, and lift lid straight up (if				
• DO NOT LEAVE	hen put lid back in place. (Unless inspection is for a septic tank in a mobile home park)				
	g outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit				
if multiple perr	nits, then use code 800 for Environmental Health inspection. Please note confirmation number				
	recording for proof of request.				
SEPTIC	or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.				
If applying for authorization	on 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 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 {_/}NO	Do you plan to have an <u>irrigation system</u> 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 {}}YES {}NO	Is any wastewater going to be generated on the site other than domestic sewage?				
	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 {	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.				
	ion 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 S	olely 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.

ROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

