nitial	Application	Date: April	24,	2018	
HIIIIai	Application	Date.			

Application #	185004392	1
	C11#	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

on same lot

Residential Land Use Application

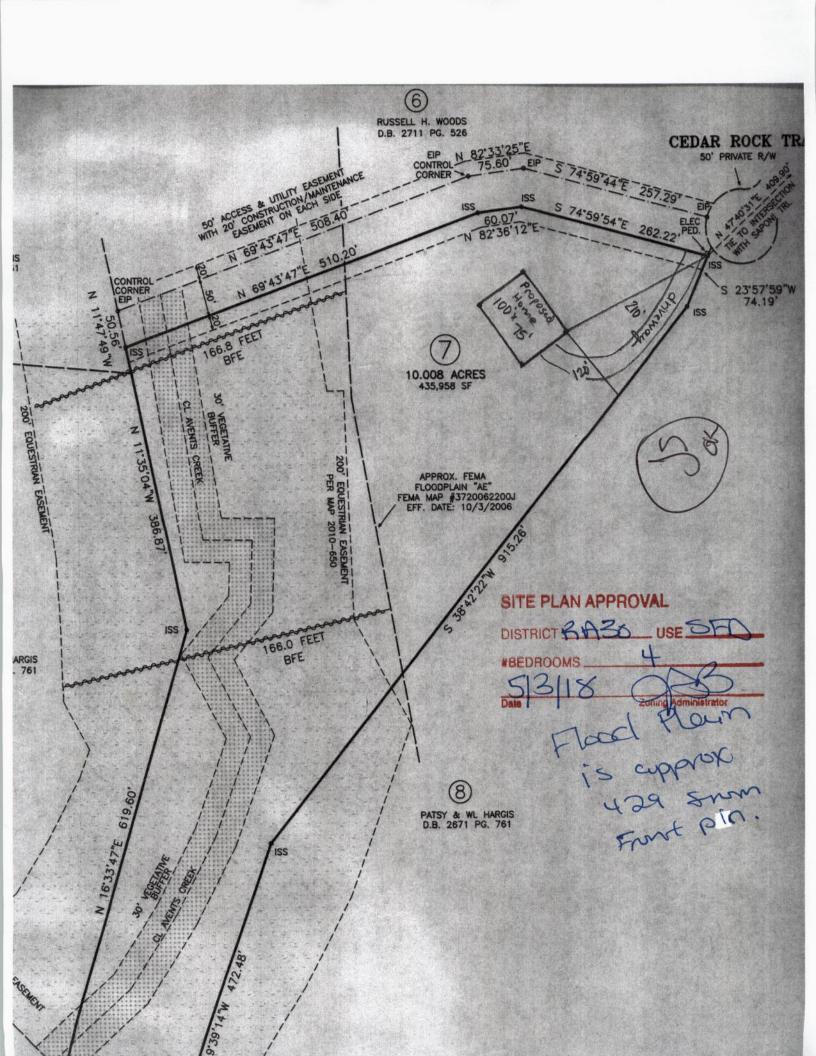
108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION __ Mailing Address: 100 Lulworth Court LANDOWNER: Robb Schiesl State: NC Zip: 21519 Contact No: (919) 500-0498 Email: robbschiesl@aol.com City: Cary Mailing Address: APPLICANT*:_ _ Zip:_____ Contact No: _____ Email: City: ______ State: _____*Please fill out applicant information if different than landowner 919 515 9917 Phone # (919) 500-0498 CONTACT NAME APPLYING IN OFFICE: Robb Schiesl _____Lot #: 07 _____Lot Size: 10 acres PROPERTY LOCATION: Subdivision: Cedar Rock _____ State Road Name: Cokesbury Road Map Book & Page: 2018 / 118 Parcel: 050633 0112 09 PIN: 0623-95-4320.000 Parcel: PIN: Plin: Power Company*: Duke-Progress *New structures with Progress Energy as service provider need to supply premise number 40129837 PROPOSED USE: Monolithic SFD: (Size 75ft x 40ft) # Bedrooms: 4 # Baths: 4 Basement(w/wo bath): V Garage: V Deck: V Crawl Space: 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 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: Addition/Accessory/Other: (Size ____x___) Use:___ 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: Proposed Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Front Rear Closest Side Sidestreet/corner lot · Nearest Building

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: $rac{Lot\ 7\ does\ come\ up\ as\ ^2}{Comp}$	468 Cedar Rock Trail Fuquay-varina on GFS
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina I hereby state that foregoing statements are accurate and correct to the best of my knowledge. F	a regulating such work and the specifications of plans submitted Permit subject to revocation if false information is provided.
Tell Shil	Apri, 24,2018
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:	Robb S	chies		APPLICATION #:
County IF THE INFO PERMIT OR depending up 910 Enviro • All line • Pla ou • Pla ou • Aff 60 • Aff 80 co • Us Enviro • Fo	* Health Dee DRMATION IN AUTHORIZATION documentation 0-893-7525 of the mental Health property in the second property is the aluation to be a refailure to use the preparing of (after select infirmation number Click2Governmental Health property in the property is the property in the property is the aluation to be a refailure to use the preparing of (after select infirmation number Click2Governmental Health property in the proper	This application to be find partment Application. THIS APPLICATION IS FIND TO CONSTRUCT SHOW IN THE PROPERTY OF THE PROPERTY O	con for Improvement P CALSIFIED, CHANGED, OR T HALL BECOME INVALID. The plan = 60 months; Complete Em Code 800 Eisible. Place "pink proper place flags per site plan determental Health requires the propose and property and provided prov	remit and/or Authorization to Construct THE SITE IS ALTERED, THEN THE IMPROVEMENT the permit is valid for either 60 months or without expiration plat = without expiration) CONFIRMATION # erty flags" on each corner iron of lot. All property ten corners. ted structure. Also flag driveways, garages, decks, veloped at/for Central Permitting. ty viewed from road to assist in locating property. the type of typ
• Af	ter uncovering multiple perroyen at end of	nits, then use code 8 recording for proof of	voice permitting system at 00 for Environmental He request.	t 910-893-7525 option 1 & select notification permit ealth inspection. Please note confirmation number to Central Permitting for remaining permits.
CEPTIC				can be ranked in order of preference, must choose one.
{}} Acc			{ ⊥ } Conventional	
$\{2\}$ Alte	*	·—-		_
The applic	ant shall notify	the local health departm s "yes", applicant MUST	nent upon submittal of this ap	pplication if any of the following apply to the property in BOCUMENTATION :
{X}YES	{_}} NO	Does the site contain a	ny Jurisdictional Wetlands?	
{_}}YES	$\{X\}$ NO	Do you plan to have ar	n irrigation system now or in	the future?
{ X }YES	{_}} NO	Does or will the buildi	ng contain any drains? Pleas	se explain. Kitchen, Bathrooms, floor drain
{}}YES	(X) NO	Are there any existing	wells, springs, waterlines or	Wastewater Systems on this property?
{_}}YES	$\{X\}$ NO	Is any wastewater goin	ig to be generated on the site	e other than domestic sewage?
{_}}YES	$\{X\}$ NO	Is the site subject to ap	oproval by any other Public A	Agency?
{X}YES	{_}} NO	Are there any Easemen	nts or Right of Ways on this	property?
{X}YES	{_}} NO	Does the site contain a	my existing water, cable, pho	one or underground electric lines?
				ate the lines. This is a free service.
I Have Rea	ad This Applica	ntion And Certify That Th	e Information Provided Here	in 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. April 24, 2018
DATE

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JBROCK Type: CP Drawer: 1
Date: 5/02/18 52 Receipt no: 339497

Year Number Amount
2018 50043927
91749 TECH 2
LILLINGTON, NC 27546
BP - ENV HEALTH FEES
8750.08

NEW TANK

BADGER ELE

Tender detail
CK CHECK PAYMEN 1027 \$750.00
Total tendered
Total payment \$750.00

Trans date: 5/02/18 Time: 15:30:17

** THANK YOU FOR YOUR PAYMENT **