*		~	7	10	11	1
Initial Ap	plication D	ate:	11	4	//	Q
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Application # _	18500	5444	139
-	CU#		

COUNTY OF HARNETT 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

Central Permitting

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
LANDOWNER: Andrew Burgess Mailing Address: 4275 Spring Hill Church Road
city: Lillington state: NC zip: 27546 contact No: 910-890-1141 Email: Jray Quinerican emb
APPLICANT: Dea Comerican Ember Mailing Address: P.O. Box 67
City: State: UC zip 28326 Contact No: 910 - 890 - 1141 Email: Gray american embarrel Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: James Landon Kay Phone # 910-890-1141
PROPERTY LOCATION: Subdivision: 4199 Spring Hill Church Road Lot #: 1 Lot Size: 1.75 State Road # 1238 State Road Name: 500 ing Hill Church Road Map Book & Page: 2018 1 120
State Road # 1200 State Road Name: State
Zoning: RA3D Flood Zone: MIN Watershed: ND Deed Book & Page: 3331, 073 Dower Company: Duke
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE: SFD: (Size 72.6 x 30) # Bedrooms: 4 # Baths: 4 Basement(w/wo bath): Garage: V Deck: Crawl Space: Slab: Deck: Crawl Space: Slab: S
(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. Buildings: No. Bedrooms Per Unit:
□ Home Occupation: # Rooms: Use: Hours of Operation: #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 366
Rear 25' 155
Closest Side 10' 33
Sidestreet/corner lot
Nearest Building
on same lot Residential Land Use Application Page 1 of 2 03/11

Page 1 of 2
APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
North Old 421 to Spring Hill Church Road
Turn right on Spring Hill Church Road Lat
is down on right about 2 miles in curve
on right side of road
If 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 submitted I hereby state that foregoing statements are accurate an
amos 9000 7/9/18
Signature of 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**

Front 4199 SpringHill Church Road Lillington NC 275416 Zoning Administrator rate 00 S 2067

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NAME: /Un	es of they		APPLICATION #:	99959		
This application to be filled out when applying for a septic system inspection.						
County Health I	Department Application	for Improvement P	Permit and/or Author	orization to Construct		
IF THE INFORMATION I	IN THIS APPLICATION IS FAL ATION TO CONSTRUCT SHAL	SIFIED, CHANGED, OR T	THE SITE IS ALTERED, T	HEN THE IMPROVEMENT		
depending upon documenta	ation submitted. (Complete site p	lan = 60 months; Complete	plat = without expiration)	on months of without expiration		
910-893-7525	depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 910-893-7525 option 1 CONFIRMATION #					
Environmental H	lealth New Septic System	Code 800	rty flags" on each cor	ner iron of lot. All property		
lines must be	clearly flagged approximate	ely every 50 feet between	en corners.	ner iron or lot. All property		
Place "orange	house corner flags" at eac	h corner of the propose	ed structure. Also flag	driveways, garages, decks,		
Place orange	swimming pools, etc. Place Environmental Health card	e flags per site plan dev	veloped at/for Central	Permitting.		
If property is t	hickly wooded. Environmer	ntal Health requires tha	y viewed from road to a	idergrowth to allow the soil		
evaluation to b	be performed. Inspectors s	hould be able to walk fi	reely around site. Do I	not grade property.		
All lots to be	addressed within 10 busi	iness days after confi	irmation. \$25.00 retui	rn trip fee may be incurred		
After preparing	uncover outlet lid, mark h	couse corners and pro	operty lines, etc. onc	e lot confirmed ready. 1 to schedule and use code		
800 (after sele	ecting notification permit if	multiple permits exist)	for Environmental Hea	alth inspection. Please note		
confirmation n	umber given at end of reco	rding for proof of reque	est.			
	v or IVR to verify results. O		d to Central Permitting	for permits.		
	ealth Existing Tank Inspe instructions for placing flags		,			
Prepare for in	spection by removing soil	over outlet end of tar	nk as diagram indicate	es, and lift lid straight up (if		
possible) and	then put lid back in place.	(Unless inspection is f	for a septic tank in a m	obile home park)		
	E LIDS OFF OF SEPTIC TAN		010 902 7525 option 1	L P coloct notification normit		
 After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number 						
given at end o	f recording for proof of requ	iest.				
Use Click2Gov SEPTIC	v or IVR to hear results. On	ce approved, proceed	to Central Permitting for	or remaining permits.		
	ion to construct please indicate	desired system type(s): ca	in be ranked in order of pr	eference, must choose one.		
{} Accepted	{}} Innovative	Conventional	{ 2 } Any			
{}} Alternative	{}} Other		_			
The applicant 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 i	s "yes", applicant MUST AT	TACH SUPPORTING I	DOCUMENTATION:			
(_)YES (_)NO	Does the site contain any Ju	risdictional Wetlands?				
{_}}YES {}}NO	Do you plan to have an irrig	gation system now or in th	he future?			
{_}}YES {}} NO	Does or will the building co	ontain any drains? Please	explain			
LYES _ NO	Are there any existing wells	s, springs, waterlines or W	Vastewater Systems on th	nis property?		
{_}}YES {}NO	Is any wastewater going to l	be generated on the site o	ther than domestic sewa	ge?		
_}YES NO	Is the site subject to approve	al by any other Public Ag	gency?			
{_}}YES {NO	Are there any Easements or	Right of Ways on this pr	roperty?			
_ YES _YNO	Does the site contain any ex	isting water, cable, phone	e or underground electric	clines?		
	If yes please call No Cuts a	it 800-632-4949 to locate	the lines. This is a free	service.		
			Vencio Altrigeno de Antonio de An			

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 Braluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10/10

DATE