Initial Application Date:_	1-8-1	0
miliai Application Date		7

Application #	1651	0037	8	19
	CU#			

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 JONES Mailing Address: 120 Wood LAKE VARINA State: NC Zip: 27526 Contact No: 919 557-1189 Email: JEFF. J. JONES @ NEXAUS. COM APPLICANT*: Mailing Address: Zip:_____ Contact No: ____ State: *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Phone # 919 625 9030 PROPERTY LOCATION: Subdivision: _____ State Road Name: 100 Parcel: 080645 - 004108 PIN: 0645-57-0594,000 Zoning: RA-30 Flood Zone: Watershed: Deed Book & Page: 2625 / 0899 Power Company*: *New structures with Progress Energy as service provider need to supply premise number from Progress Energy. PROPOSED USE: Monolithic SFD: (Size ____x ___) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: 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 (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: Use: _____ Hours of Operation: #Employees: Home Occupation: # Rooms: Addition/Accessory/Other: (Size 56 x 40) Use: INAROUND SWIMMING POOL Closets in addition? (_) yes (\(\Delta \)) no County _____ Existing Well _____ New Well (# of wellings 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 Manufactured Homes: Other (specify): Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Front Minimum Actual 70 Rear Closest Side Sidestreet/corner lot Nearest Building

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	901 N, (L) CHRISTIAN LIGHT KD,
(R) WOOD LAKE DR	
If permits are granted I agree to conform to all ordinances and laws of the Ste I hereby state that foregoing statements are accurate and correct to the best Signature of Owner or Owner's Agent	The of North Carolina regulating such work and the specifications of plans submitted. of my knowledge. Permit subject to revocation if false information is provided.

^{***}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**

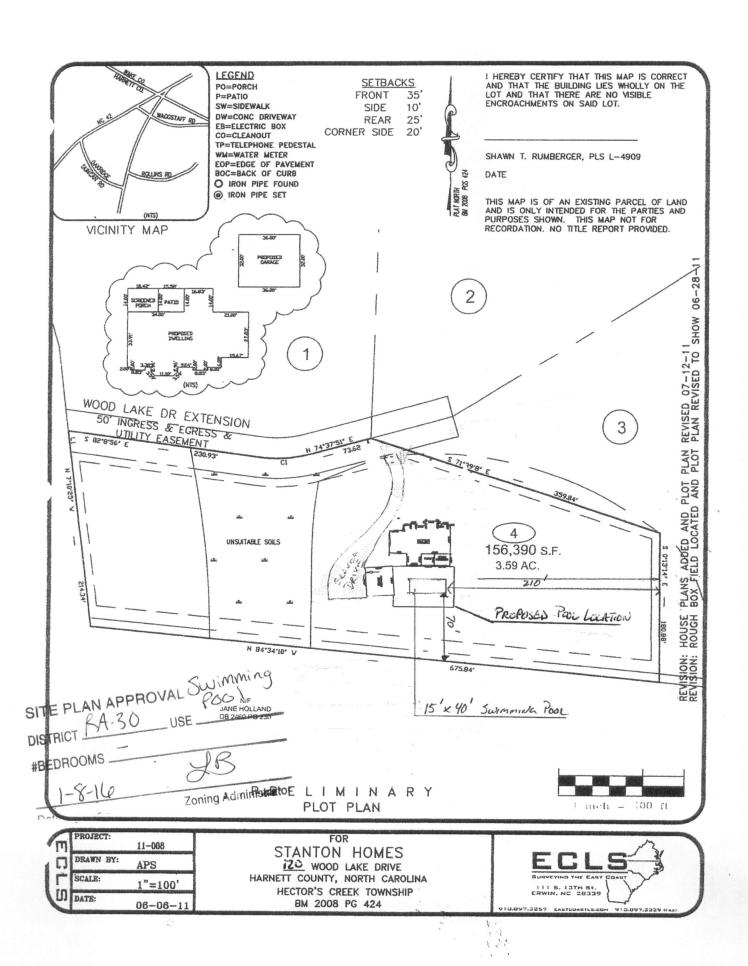
NAME: <u>JEFEE</u>RY & LINDA JONES

	2	7	8	1	9	
APPLICATION #:	0	l	U	l	1	

This application to be filled out when applying for a septic system inspection. County Health Department Application for Improvement Permit and/or Authorization to Construct IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) CONFIRMATION # 0 910-893-7525 option 1 Environmental Health New Septic System Code 800 All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners. Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. Place orange Environmental Health card in location that is easily viewed from road to assist in locating property. If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation 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 for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready. After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request. Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits. Environmental Health Existing Tank Inspections Code 800 Follow above instructions for placing flags and card on property. Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park) DO NOT LEAVE LIDS OFF OF SEPTIC TANK 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 of recording for proof of request. Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits. If applying for authorization 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 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 is "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 Are there any existing wells, springs, waterlines or Wastewater Systems on this property? {___}} 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 {__}}YES {__}} NO Are there any Easements or Right of Ways on this property? { } NO { }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. I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And

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)

State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.



Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: JEFF 8 LINDA JOWES Phone: 919 557 /189
Owner (s) Mailing Address: 120 Wood LAKE DR
FUQUAY VARINA NC 27526
Land Owner Name (s):Phone: Construction or Site Address:
PIN# 0645-57-0594,000 Parcel# 080645-004108
Job Cost: 2,000 Description of Work to be done ELECTRICAL FOR SWIMMING
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other * For Progress Energy customers we need the premise number
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington:
401 N, (L) CHEISTIAN LIGHT (R) WOOD LAKE DR
Subdivision:Lot #:
1 <u>Haere Paul Weine</u> will provide the <u>FLECTRICAL</u> labor on this structure. (Contractors Name) (Trade)
HARTE POLL WEINE will provide the
I HARTE POLL WEINE will provide the FLECTRICAL labor on this structure. (Contractors Name) (Trade) I am the building owner or my NC state license number is, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all
I am the building owner or my NC state license number is, which entitles me to
I am the building owner or my NC state license number is, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.
I am the building owner or my NC state license number is, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. HALTE POOL WIRING & LIGHTING
I am the building owner or my NC state license number is
I am the building owner or my NC state license number is

*Company name, address, & phone must match information on license

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 16-50037819

Property Address 120 WOOD LAKE DR

PARCEL NUMBER 08-0645- - -0041--08
Application type description CP SWIMMING POOL Date 2/02/16 Subdivision Name Property Zoning RES/AGRI DIST - RA-30 Owner Contractor ______ 312 HOLLY BRANCH RD HARTE ELECTRIC 7836 HWY 55 S HOLLY SPRINGS NC 27540 WILLOW SPRINGS NC 27592 (919) 639-6851 Applicant ______ PEARSAL JON (919) 625-9030 --- Structure Information 000 000 15'6X40' INGROUND SWIMMING POOL Flood Zone FLOOD ZONE X Other struct info PROPOSED USE ELECTRICAL SEPTIC - EXISTING? EXIST SEPTIC ______ Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1125129
Issue Date . . . 2/02/16 Valuation 0
Expiration Date . . 7/31/16

Phone Access Code . 1125111
Issue Date . . . 2/02/16 Valuation . . . 0
Expiration Date . . 2/01/17

Special Notes and Comments
T/S: 01/08/2016 02:00 PM LBENNETT -401 N LEFT ON CHRISTIAN LIGHT RD -

Additional desc . . POOL PERMIT

RIGHT ON WOOD LAKE DR

Permit RESIDENTIAL ELECTRICAL PERMIT

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Page 2 Date 2/02/16 Application Number 16-50037819

Property Address 120 WOOD LAKE DR

PARCEL NUMBER 08-0645- - -0041- -08
Application description . . . CP SWIMMING POOL Subdivision Name Property Zoning RES/AGRI DIST - RA-30 Required Inspections Phone Insp Initials Date Insp# Code Description Permit type . . . LAND USE PERMIT 818 Z818 PZ*ZONING INSPECTION 999 Permit type . . . RESIDENTIAL ELECTRICAL PERMIT 999 205 E205 R*ELEC UNDER SLAB 215 E215 R*ELEC. UND. POOL 213 E213 R*ELECTRICAL UNDERGROUND 131 R131 ONE TRADE FINAL 999

999 999