



Initial Application Date: 7/25/18

Application # CPSP 17-50042190
CU# R

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: Chad Donovan Mailing Address: 186 Grahamridge Ln
City: Fuquay-Varina State: NC Zip: 27526 Contact No: (919) 946-6232 Email: donovan_940@ga.hoo.com

APPLICANT*: Same Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

ADDRESS: 106 Grahamridge Lane PIN: 0604-98-6959-000

DEED OR OTP: _____

PROPOSED USE:

- SFD: (Size ____ x ____) # Bedrooms: ____ # Baths: ____ Basement(w/wo bath): ____ Garage: ____ Deck: ____ Crawl Space: ____ Slab: ____ Slab: ____ Monolithic
(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: Above Ground Pad w/ Deck Closets in addition? () yes () no

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion Relocation _____ Existing Septic Tank _____ County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

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: 1 ext Manufactured Homes: _____ Other (specify): Pool w/ Deck

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 and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent Date 7/25/2017

*****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*

APPLICATION CONTINUES ON BACK

strong roots • new growth

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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)

Environmental Health New Septic System

- **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.**

Environmental Health Existing Tank Inspections

- 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

MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION

SEPTIC

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 irrigation system 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 Is any wastewater going to be generated on the site other than domestic sewage?
- YES NO 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 NO 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 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.

SR 1415

SR 1448

WYNDHAM DRIVE

SR 1441

NC HWY. 210

VICINITY MAP (NTS)

NC HWY. 55

ANGIER

LEGEND

- NTS NOT TO SCALE
- EIP EXISTING IRON PIPE
- PP POWER POLE
- W/M WATER METER
- TB TELEPHONE BOX
- IPS IRON PIPE SET
- CP&L TRANSFORMER
- CATV CABLE TV BOX
- L POLE LIGHT POLE
- OHPL OVERHEAD POWER LINE
- F.E.S. FLARED END SECTION (PIPE)
- RCP REINFORCED CONC. PIPE
- B.O.C. BACK OF CURB
- F.H. FIRE HYDRANT
- C/O SEWER CLEAN OUT
- EIS EXISTING IRON STAKE
- M.H. MANHOLE
- ECM EXISTING CONCRETE MONUMENT
- P.K. PARKER KALON NAIL

CURVE	RADIUS	LENGTH	CHORD	CH.BEARING
C1	225.00'	17.79'	17.79'	N 20°08'46" W
C2	25.00'	18.81'	18.37'	N 00°51'09" W
C3	50.00'	27.17'	26.84'	N 05°08'08"

GRAHAMRIDGE

LANE
(50' PUBLIC R/W)

C1 C2 C3

S 87°43'01"W 208.58'

PROP DRIVE

PROP WALK

PROPOSED HOUSE

7

N 51°29'20"E 263.69'

S 05°17'39"E 48.93'

S 00°31'46"E 168.98'

JARRETT BAY LANE

(50' PUBLIC R/W)

NC GRID (NAD 83)
REF: B.O.M.2006 PG.1094

6

SITE PLAN APPROV. - *Popple*

DISTRICT *BA30* USE *SH*

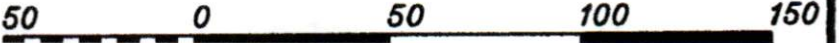
#BEDROOMS *3*

[Signature]
Zoning Administrator

Date

7/25/18

NOTE: SHOWN IS LOT 7 OF WYNDHAM PLACE S/D
REF: B.O.M.2006 PG.1094



HTE# 07-5-17749

Harnett County Department of Public Health 19830

PERMIT # 23977

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

PROPERTY LOCATION: SR1415 Rauls CH RD

Name: (owner) Freemans Construction Service SUBDIVISION Wynston PLACE P4Z LOT # 7

System Installer: Tison Matthews Registration # _____

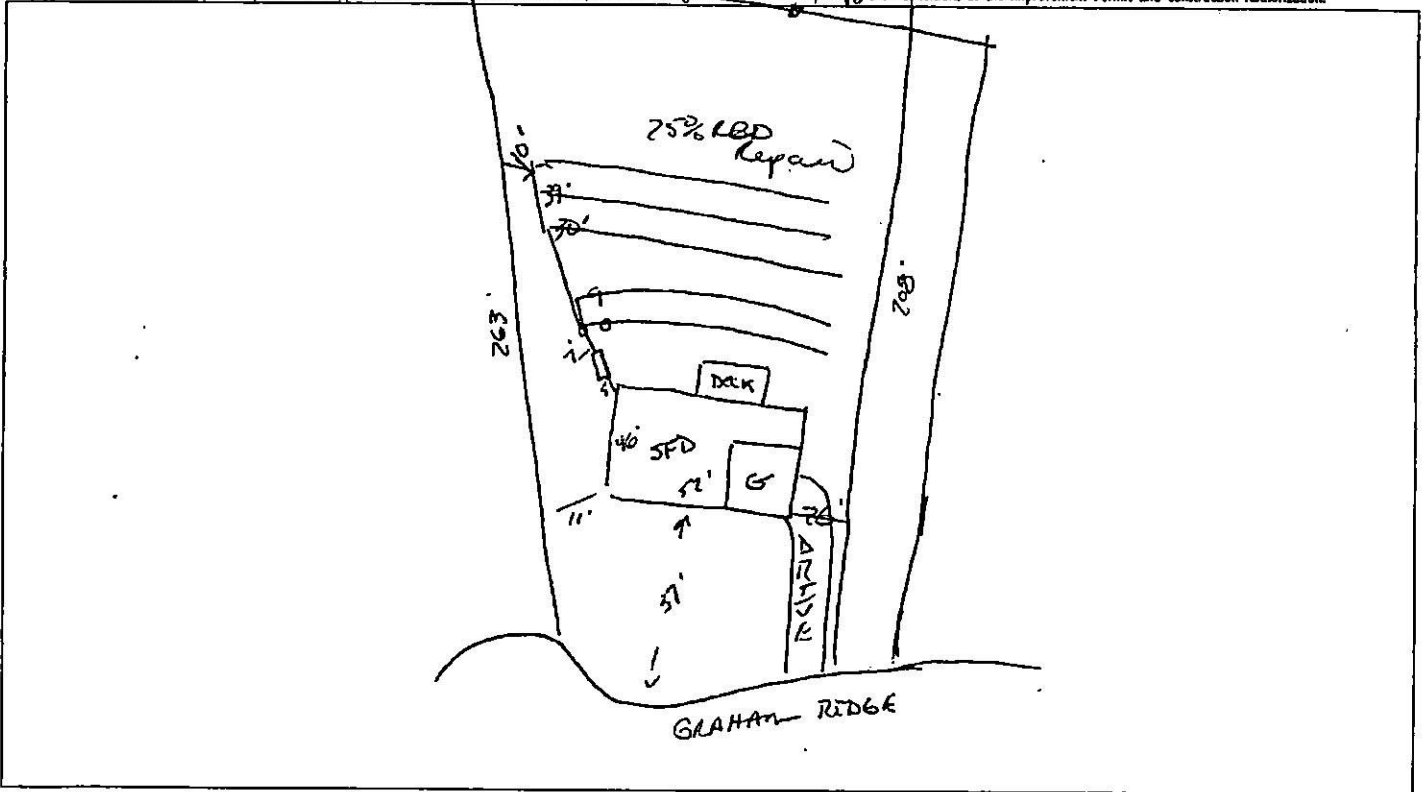
Basement with plumbing: Garage Number of Bedrooms _____

Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: 25% REDUCTION System - Type III G Belay Types V and VI Systems expire in 5 years.

(In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other 25% REDUCTION Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 5 exact length of each ditch 60 feet width of ditches 3 feet depth of ditches 20 inches

French Drain Required: _____ Linear feet

Authorized State Agent James E. Manhart Date 12-11-07



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