

Initial Application Date: 11-5-15

Application # 1550037414
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

LANDOWNER: Randolph + Lisa Zilli Mailing Address: 167 Gwendolyn Way
City: Fuquay Varina State: NC Zip: 27506 Contact No: 919/303-3862 Email: Zillifamily@yahoo.com

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

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Ballard Woods Lot #: 145 Lot Size: 0.765
State Road # 167 State Road Name: Gwendolyn Way Map Book & Page: 203, 409
Parcel: 08 0652 0089 31 PIN: 0651-39-0682-000
Zoning: RA30 Flood Zone: X Watershed: IV Deed Book & Page: 3337, 743 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ 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 12 x 16) Use: Shed 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: 1 ext Manufactured Homes: _____ Other (specify): 1 proposed shed

Required Residential Property Line Setbacks:

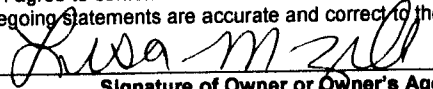
| | Minimum | Actual |
|------------------------------|------------|------------|
| Front | | <u>35'</u> |
| Rear | <u>25'</u> | <u>25</u> |
| Closest Side | <u>10'</u> | <u>10</u> |
| Sidestreet/corner lot | | |
| Nearest Building on same lot | | |

Comments: _____

APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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

11.5.2015
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: Zilli

APPLICATION #: _____

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)

910-893-7525 option 1

CONFIRMATION # _____

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.

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.

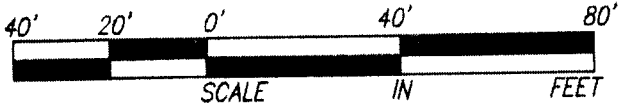
I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible 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.

Lisa Marie Zilli
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

11.5.2015
DATE

LEGEND

- EIP - EXISTING IRON PIPE
- EIS - EXISTING IRON STAKE
- IPS - IRON PIPE SET
- R/W - RIGHT-OF-WAY
- BM - BOOK OF MAPS
- DB - DEED BOOK
- PG - PAGE
- S/D - SUBDIVISION



SCALE: 1" = 40'

I HEREBY CERTIFY THAT THIS SURVEY COMPLIES WITH THE NORTH CAROLINA STANDARDS OF PRACTICE FOR LAND SURVEYING (SECTION 1600) FOR CLASS A & CLASS B SURVEYS, THAT THE RATIO OF PRECISION BEFORE ADJUSTMENT IS: 1/10,000 (TRAVERSE NOT BALANCED)

[Signature]

PLAT NOT PREPARED FOR RECORDATION

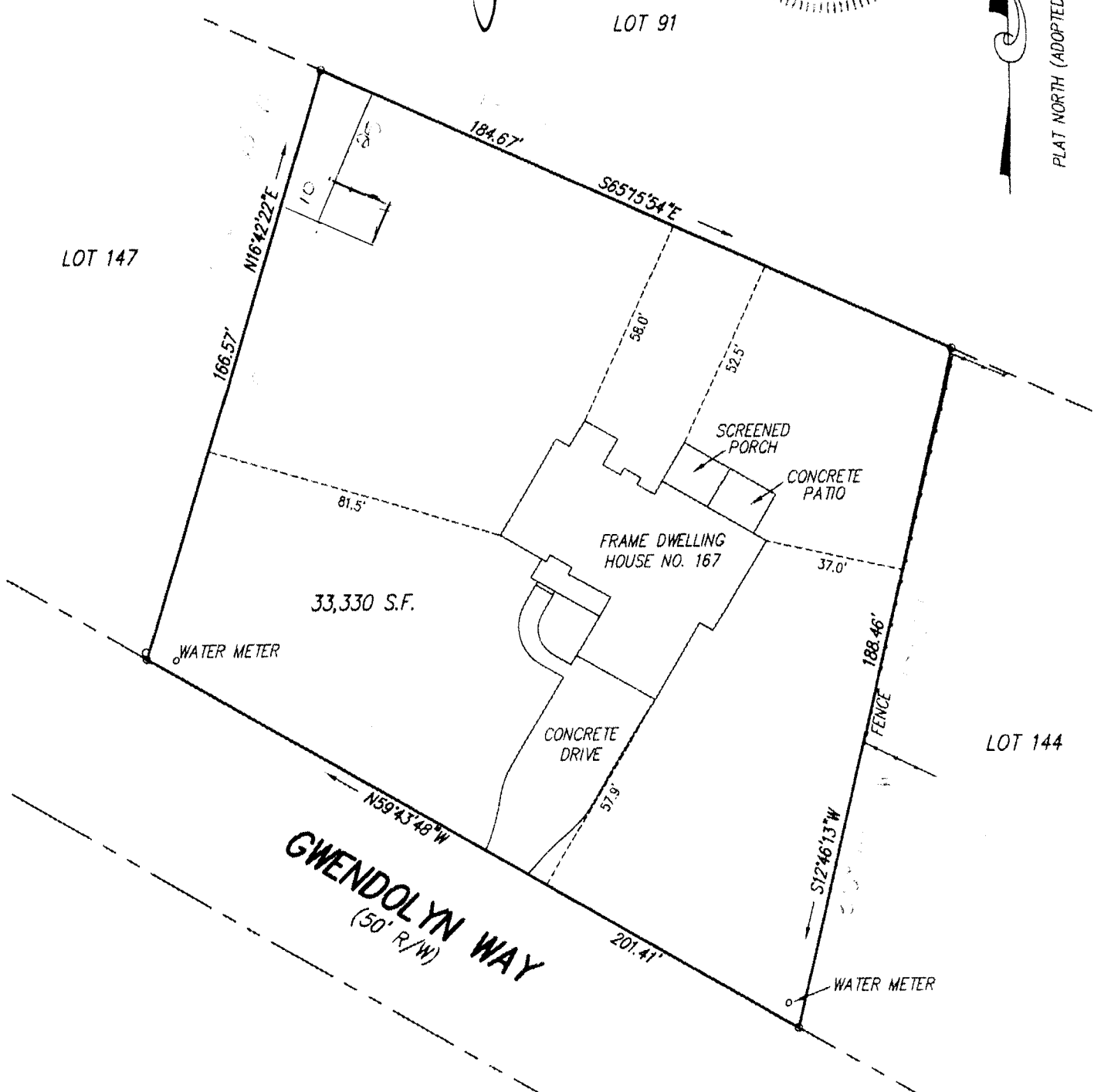
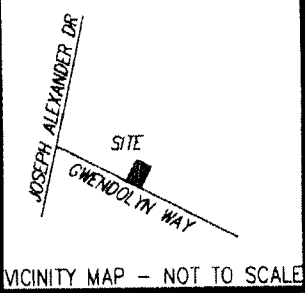
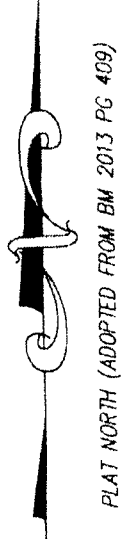
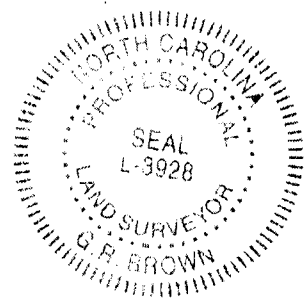
NOTE: 3/4" EIP AT ALL PROPERTY CORNERS UNLESS NOTED OTHERWISE

SITE PLAN APPROVAL

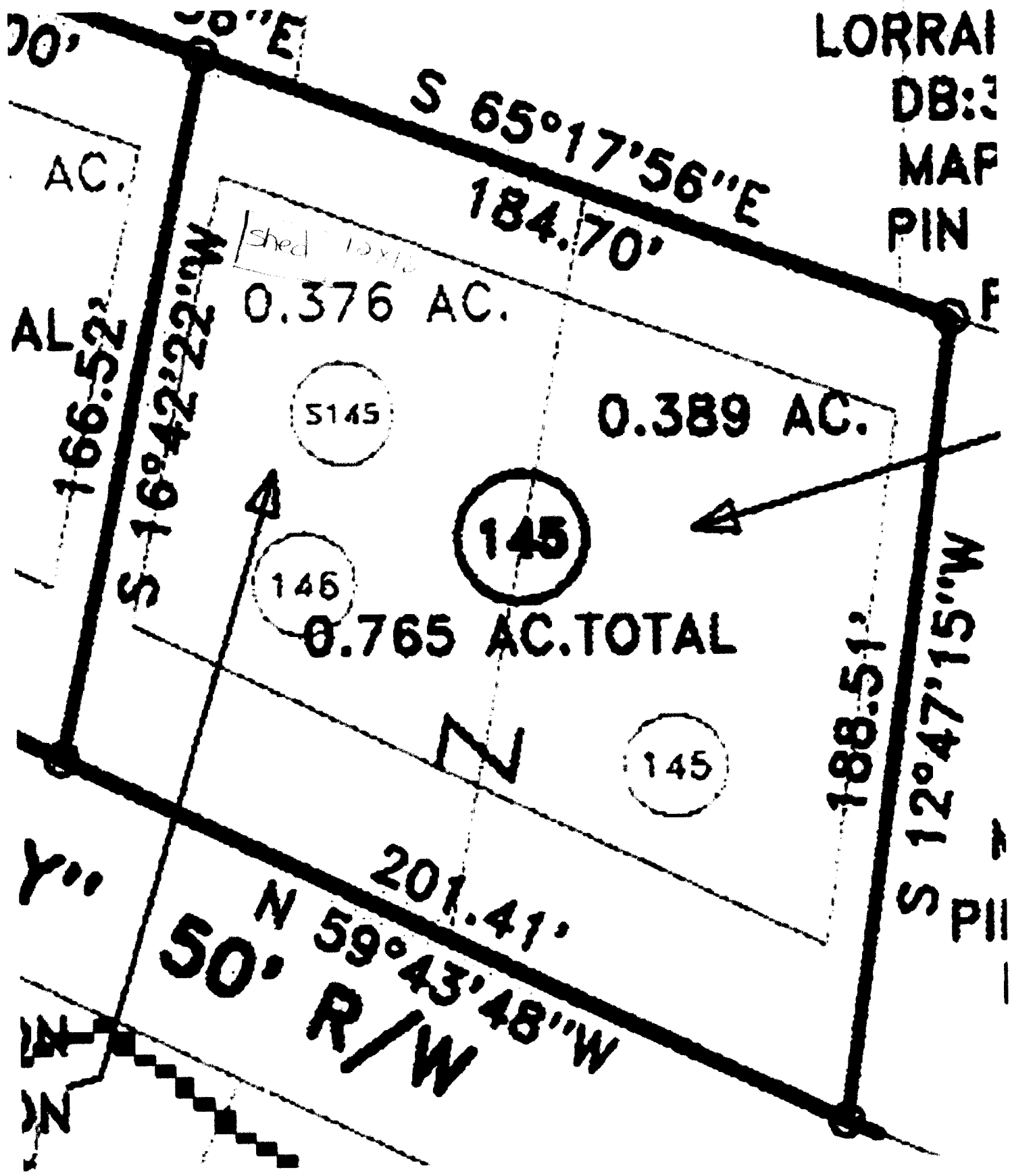
DISTRICT R30 USE Single

#BEDROOMS 1

Date 11-5-15 Zoning Administrator *[Signature]*



LOT SHOWN IS:
LOT 145



Physical Address: 167 Gwendolyn Way Fuquay Varina, NC 27526 Lot 145

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2015 Sep 04 04:46 PM NC Rev Stamp \$ 460.00
Book: 3337 Page: 743 Fee: \$ 26.00
Instrument Number: 2015012511

HARNETT COUNTY TAX ID #
080652 0089 31

09-04-2015 BY: MT

**NORTH CAROLINA
GENERAL WARRANTY DEED**

Excise Tax: \$460.00

Recording Time, Book and Page:

Tax Map No.

Parcel Identifier No: 0073216 / 0651-39-0682.000

Mail after recording to: Grantee

This instrument was prepared by: Lynn A. Matthews, Attorney (No Title Examination or Tax Advice Given)

THIS DEED made this 1st day of September, 2015 by and between

GRANTOR

Millennium Homes of North Carolina LLC, a North Carolina Limited Liability Company

Mailing Address: P.O. Box 727, Dunn, NC 28335

GRANTEE

Randolph M. ZIII and wife, Lisa M. ZIII
Property Address: 167 Gwendolyn Way, Fuquay Varina, NC 27526

Mailing Address: 167 Gwendolyn Way, Fuquay Varina, NC 27526

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land and more particularly described as follows:

BEING all of Lot 145 as shown on plat map dated December 24, 2013, entitled "Lot Recombination Ballard Woods, Phases 4A and 4B" and recorded in Map Book 2013, Page 409, Harnett County Registry

This lot is conveyed subject to the Restrictive Covenants recorded in Book 1682, Page 828 and Book 1633, Page 502 and Book 1865, Page 785 and Book 1951, Page 487 and Book 2560, Page 92 and Book 2814, Page 694, Harnett County Registry.

Submitted electronically by "Law Offices of Jonathan Richardson"
in compliance with North Carolina statutes governing recordable documents
and the terms of the submitter agreement with the HARNETT COUNTY REGISTER OF DEEDS

HTE# 14-5-346652

Ha. tt County Department of Public Health

23666

PERMIT # 28199

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: BALLARD RD

Name: (owner) CUMBERLAND HOMES INC SUBDIVISION BALLARD WOODS LOT # 145

System Installer: TED BROWN Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

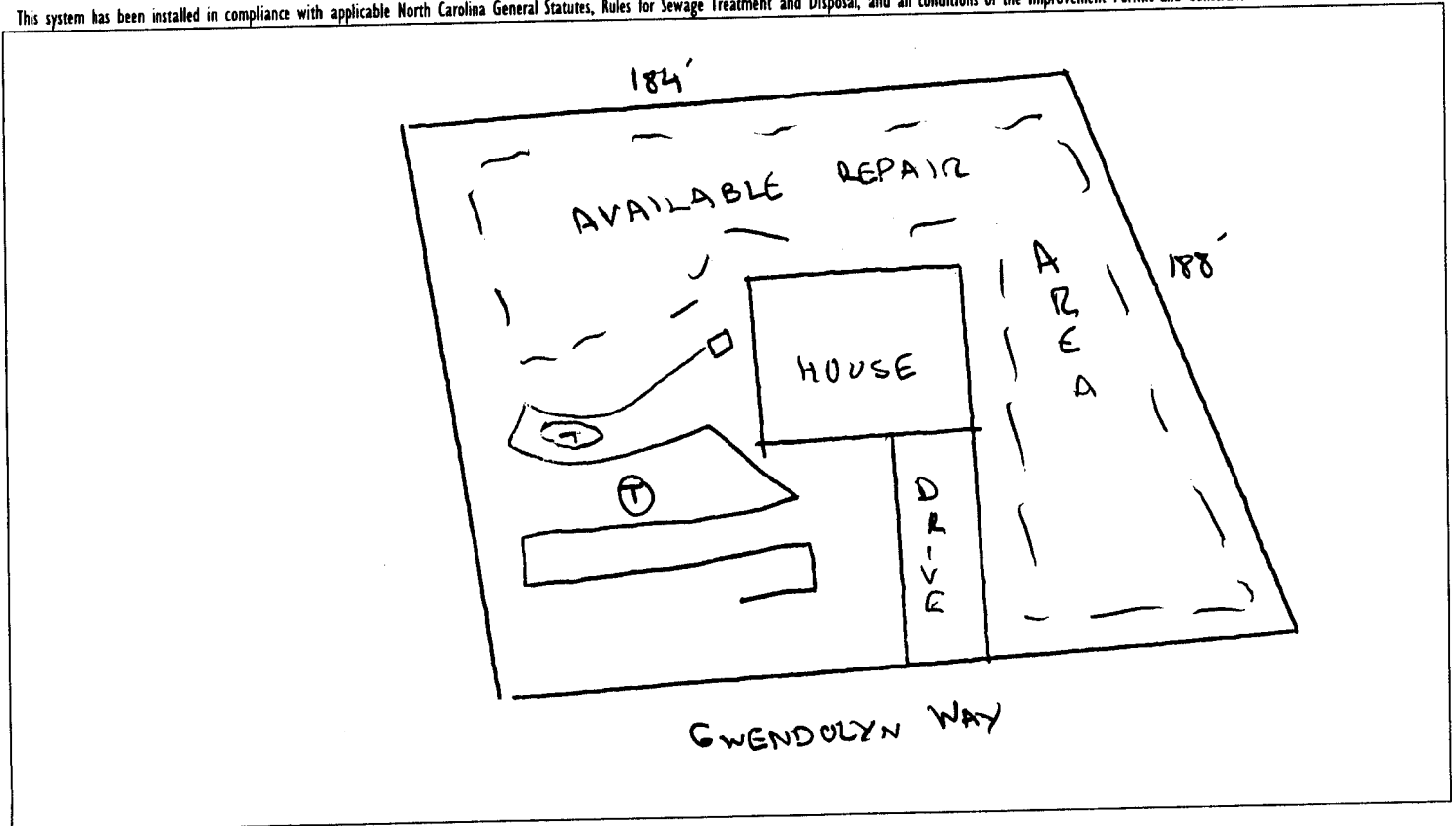
Type of Water Supply: Community Public Well Distance from well 100 feet

System Type: 1119 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: _____

D-Box Pump Alarm H2O Line PWR Line

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

Type of system: Conventional Other CHAMBER (24") Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 300 feet width of ditches 3 feet depth of ditches 12 inches

French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 6/24/15