Initial Application Date:	7/6/18

Application # _	1850044433
	01111

Central Permitting

Nearest Building on same lot

Residential Land Use Application

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

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION 4/hher 5 Kob Mailing Address: 65 SIDWEhh CC VA AIN State: NC Zip: 37576 Contact No: ______ Email: JVR MINHER @ AOL. CON EN Mailing Address: 65 SIDWELL COURT VAMINA State: NC Zip: 23576 Contact No: ______ Email: _TVRMILLER & A TAMES V. MILLER Phone # 760 CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: Deed Book & Page: 3566 90 *New structures with Progress Energy as service provider need to supply premise number 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__ 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: Hours of Operation:______#Employees:___ Home Occupation: # Rooms: Use: _____ Addition/Accessory/Other: (Size // x20) Use: FEASONNAL /SHED Closets in addition? (_) yes (2) 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 (X) no Does the property contain any easements whether underground or overhead (___) yes (X) no Manufactured Homes: Other (specify): Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Front Rear Closest Side Sidestreet/corner lot_

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:	APPLICATION #: UUU33
County Health I	*This application to be filled out when applying for a septic system inspection.*
	Department Application for Improvement Permit and/or Authorization to Construct IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
depending upon document	ation submitted. (Complete site plan = 60 months; Complete plat = without expiration)
910-893-7525	ATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration ation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 5 option 1 CONFIRMATION #
Environmental F	Itealth New Septic System Code 800 irons must be made visible. Place "pink property flags" on each corner iron of lot. All property
All property lines must be	clearly flagged approximately every 50 feet between corners.
	e house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,
	swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
	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
	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
	uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
	ng proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code ecting notification permit if multiple permits exist) for Environmental Health inspection. Please note
	number given at end of recording for proof of request.
	ov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
	dealth Existing Tank Inspections Code 800
	instructions for placing flags and card on property.
	nspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (in
	then put lid back in place . (Unless inspection is for a septic tank in a mobile home park) /E LIDS OFF OF SEPTIC TANK
SPERIOR CONTRACTOR SPECIFICATION CONTRACTOR SPECIFICATION CONTRACTOR CONTRACT	ring outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
	rmits, then use code 800 for Environmental Health inspection. Please note confirmation number
	of recording for proof of request.
	ov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
SEPTIC If applying for authoriza	tion 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 noting	fy the local health department upon submittal of this application if any of the following apply to the property in
	is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	Does the site contain any Jurisdictional Wetlands?
{}}YES	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES	Does or will the building contain any drains? Please explain
{}}YES	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	Is the site subject to approval by any other Public Agency?
{}}YES	Are there any Easements or Right of Ways on this property?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

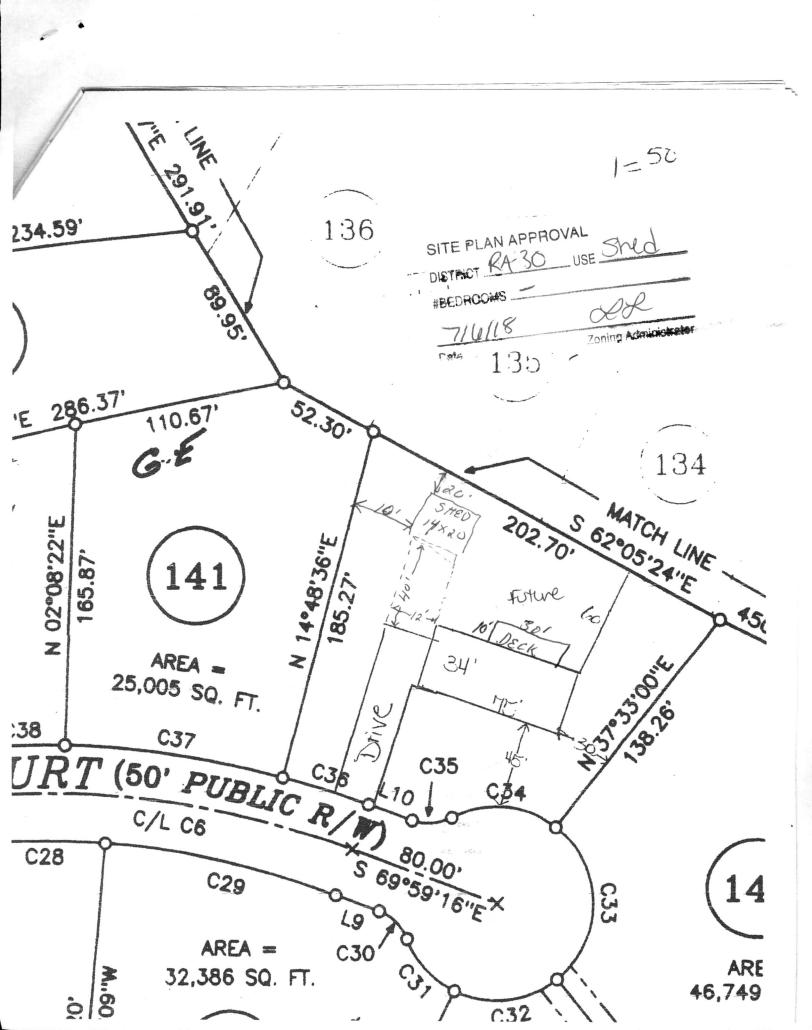
I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible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

Does the site contain any existing water, cable, phone or underground electric lines?

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

{__}}YES

{__}} NO



760-390. 2334 (C) 919,557, 2246 (H)

MILLER 65SIDWELL COURY FUQUAY VARINA NC 27526

		100	a 1006
Name: (owner) 2	my Hopes	New Installation	O Santia Tank
Property Location:	SR# 1443 LAFAYEHE RD	☐ Repairs	Nitrification Line
	SR# 1443 LAFay EHE RD Subdivision V. H.	Lot #142	a Munication Line
	TAX ID#		
Contractor: LONNE	& Johnson	Registration #	
Basement with Plum	nbing: Garage:	or described in	
	Well Public Community		
	ft.		
Following are the s	pecifications for the sewage disposal sys	tom on above and	
	s the seriage disposal sys	tem on above captioned	d property.
Type of system:	Conventional Other		-
Size of tank:	Septic Tank: 1000 gallons Pur	mp Tank: gall	ons
Subsurface	No of		
Drainage Field	ditches 2 of each ditch 150 ft.	ditches 3 ft. dit	chesin.
rielich Drain;	Linear feet		
	Date:	3-28-06	
PERMIT NO. 22	Inspected b	Environmental He	fors
	g20' feet	O Environmental He	aith Specialist
	1 12. V	7	
10' F	1 20'		
Propert	141	1/12.	
FEOLO	Deck V		
•	346 Home	/.	
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	E Report		
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	STO WELL CT		

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
Date: 7/06/18 53 Receipt no: 7323

Year Number Amount 2018 50044433 91750 TECH 3 LILLINGTON, NC 27546 B4 BP - ENV HEALTH FEES \$100.00

JAMES MILLER

Tender detail
CP CREDIT CARD \$100.00
Total tendered \$100.00
Total payment \$100.00

Trans date: 7/06/18 Time: 11:25:22

** THANK YOU FOR YOUR PAYMENT **