

Initial Application Date

xilled 5

COMMERCIAL

Control Description (Physical) 109 E	Exact Street Lillington NC 2754	COUNTY OF HARNETT	LAND USE APPLICATION	5 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER DAVID &	CHRISTINA KE	ARNEY Mailir	a Address: 46 SHERI	MAN PINES DRIVE
City: FUQUAY VARIN	NA State: NC	Zip: 27526 Contact	# 843-471-4494	mschrishorne@gmail.com
APPLICANT*: david kea	rney	Mailir	ng Address: 46 sherma	an pines dr
City: fuquay varina	State: NC	Zip: 27526 Contact	_# 503-944-9444	an pines dr _ _{Email:} david_p_k@yahoo.com
*Please fill out applicant information	on if different than landowne	er		
CONTACT NAME APPLYING	S IN OFFICE: Christin	na kearney	P	none #
Address: 46 sherman	pines drive	PIN:	0655-43-4868.000	
Zoning:Watersh	ed:Flood:_	Minimal Deed Book	Page: 3845 /0225	z.
PROPOSED USE:			120	denons
PROPOSED USE: X Multi-Family Dwelling N Business Sq. Ft. R	lo. Units: 1	No. Bedrooms/Unit:	1 10	aco.oro
			L	ME
Business Sq. Ft. R	etail Space:	Туре:	# Employees:	Hours of Operation:
Daycare # Presch	oolers:	# Afterschoolers:	# Employees:	Hours of Operation:
Industry Sq. Ft: _	Type:		# Employees:	Hours of Operation:
Church Seating (Capacity:	# Bathroo	oms:Kitch	nen:
Accessory/Addition/Othe	er (Sizex) U	se:		
Water Supply: _X County	_X_ Existing Well		ellings using well 2 New Well Application at the	*Must have operable water before final same time as New Tank)
Sewage Supply: New S	Septic Tank Expans	sion Relocation X cklist on other side of app	_Existing Septic Tank lication if Septic	County Sewer
Comments:				
This is an ap	plication to mod	ify the building pe	ermit created by the	e previous ownwer.
This unit is a	1,600 sq. ft. 1 b	edroom apartme	nt with 1.5 baths, 1	BR.
It has separa	ate electricity and	d water bill. Septi	c system was built	to handle both units.

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. Verified by PDFFiller revocation if false information is provided.

I hereby state that foregoing statements are accurate and correct to the best of my knowledge.

Signature of Owner or Owner's Agent

This application expires 6 months from the initial date if permits have not been issued RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

***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

This application expires 6 months from the initial date if permits have not been issued

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

X 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 <u>undergrowth</u> 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.

X 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

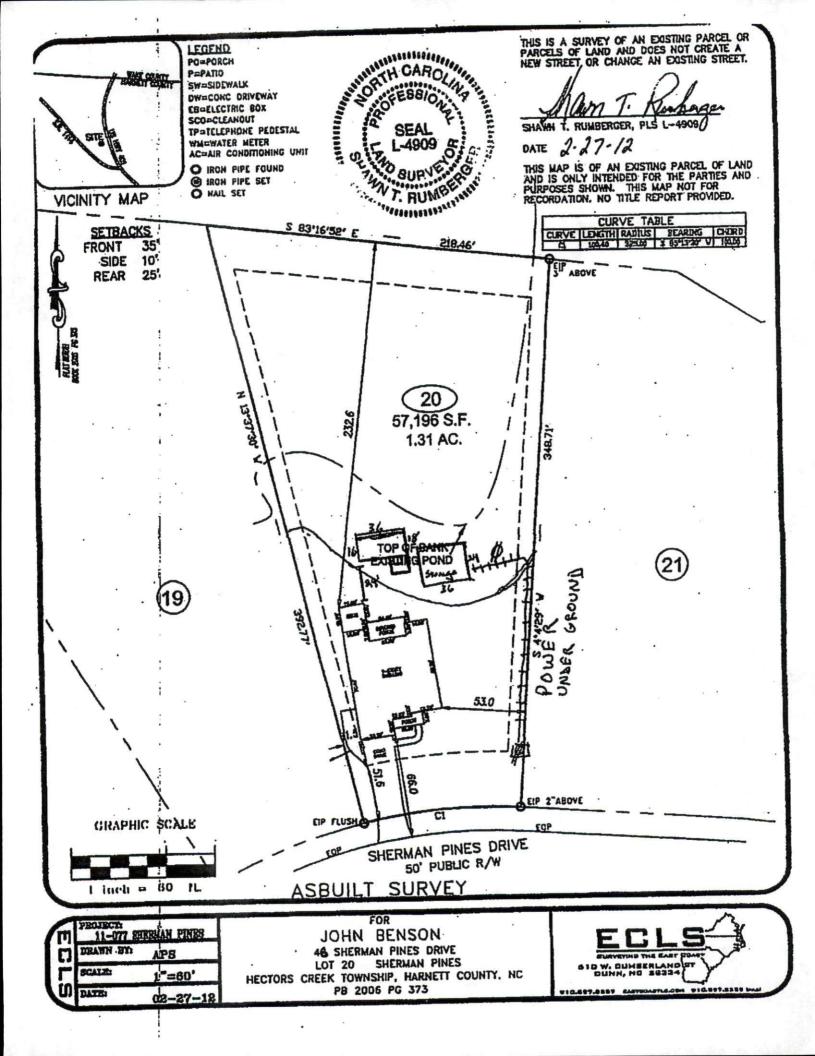
"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

SEPTIC								
If applying	for authorizati	ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.						
{}} Acc	epted	{ } Innovative { } Conventional { } Any						
{ } Alte	rnative	{ } Other						
		y the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:						
{ }YES	{ X } NO	Does the site contain any Jurisdictional Wetlands?						
{ }YES	{ X } NO	Do you plan to have an irrigation system now or in the future?						
{ }YES	{ X } NO	Does or will the building contain any drains? Please explain.						
{X}}YES	{ _} NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?						
{ }YES	{ X } NO	Is any wastewater going to be generated on the site other than domestic sewage?						
{ }YES	{ X } №	Is the site subject to approval by any other Public Agency?						
{ }YES	{ X } №	Are there any Easements or Right of Ways on this property?						
{ X }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.

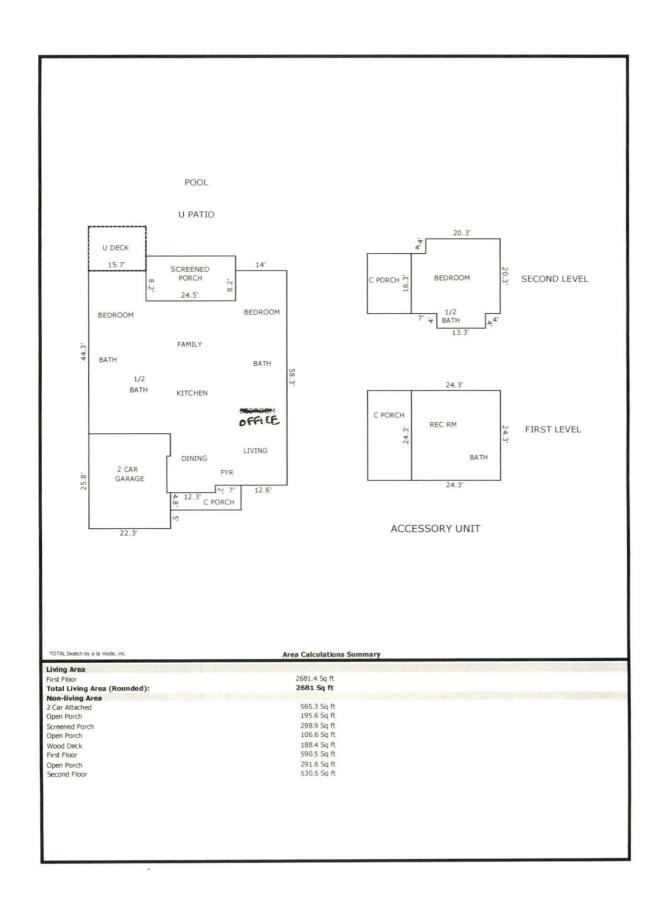
Harnett County Department of Public Health HTE# 01-5-17897822 **Operation Permit** 22213 PERMIT # 26721 New Installation Septic Tank Mitrification Line Repair Expansion PROPERTY LOCATION: SHERMAN PINES DE SUBDIVISION SHERMAN PINES LOT # 2.0 Name: (owner) Registration # 46 Shorman / System Installer: Garage Number of Bedrooms Basement with plumbing: Type of Water Supply: Community De Public 100 Types Y and YI Systems expire in 5 years. System Type: Owner must contact Health Department 6 months prior to expiration for permit renewal. (In accordance with Table V a) This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Freatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. 21 342 348 HOUSE MANIFOLD SHEEMAN PINES OR PERHIT CONDITIONS: System shall perform in accordance with Rule .1961. Performance: As required by Rule . 1961. Monitoring: As required by Rule .1961. Other: Haintenance: Subsurface system operator required? Yes I No If yes, see attached sheet for additional operation conditions, maintenance and reporting.

REPLACE BOTTERY IN PAGEL ONCE A YEAR. Operation: IV. MANIFOLD, ALL SYSTEM SPECIFICATIONS ON FILE AT DISTRIBUTION THROUGH ٧. Other: H20Line □ Pump [] Alorm **PWR** Line following are the specifications for the sewage disposal system on the above captioned property. gallens Pump Tank 1000 Type of system: Conventional Other Pune To CHAMBER COHT Septic Tank: 1000 depth of exact length width of No. of Subsurface of each ditch Vacanous feet ditches ditches 12 inches ditches Drainage Field 240 TOTAL French Drain Required: LETUS Authorized State Agent



Building Sketch

Borrower	DAVID P KEARNEY						
Property Address	46 SHERMAN PINES DR						
City	FUQUAY VARINA	County	HARNETT	State	NC	Zip Code	27526
Lender	THE FEDERAL SAVINGS BANK						



Aerial Map

Borrower	DAVID P KEARNEY						
Property Address	46 SHERMAN PINES DR						
City	FUQUAY VARINA	County	HARNETT	State	NC	Zip Code	27526
l ander	THE EEDERAL SAVINGS BANK						

