

Initial Application Date:				Applik	cation#	
•					CU#	
Central Permitting	108 E. Front Street,	UNTY OF HARNETT Lillington, NC 27546	RESIDENTIAL LAND Phone: (910) 893-	USE APPLICA 7525 ext: 2 F	TION ax: (910) 893-2793	www.harnett.org/permits
"A RECORDED S	URVEY MAP, RECORDED	DEED (OR OFFER TO F	URCHASE) & SITE PLAN	ARE REQUIRED W	HEN SUBMITTING A LA	ND USE APPLICATION**
LANDOWNER: Haw	ingle- Propost	mot NC. LL	C Mailing Address:	2659	San Lee D.	der
City: Sanford	State	:NC Zip: 2783	Contact No: 919-	770-596	Email: Blander	o having the properties
APPLICANT:						<u> </u>
City:	State	: Zip:	Contact No:		Email:	
110	- 1. 1.	9 11/	ACRI DIN			
Zoning: Floor Setbacks - Front:	o:wate	rxned:D	ed Book/Page: 💯	021 Pas	e 270	
55		July 1	Office.		S .	
PROPOSED USE:			nt(w/wo bath) K_Gar			
☐ Mod: (Sizex	(is the second floor	finished? () yes () no Any other site	built additions?	() yes () no	rameOff Frame
Duplex: (Sizex						_(site built!)
<u>.</u>					500 PD	_
☐ Home Occupation: # R	:ooms:	_ Use:	Hours of Op	eration:	**************************************	_#Employees:
		-				dition? () yes () no
Water Supply:Count Sewage Supply:New (Complete E Does owner of this tract of la	Septic Tank Exp	Need to Co ansion _ Relocati hecklist on other side	emplete New Well Appli ionExisting Septic a of application if Septic	cation at the sar Tank Cou	ne time as New Tank unty Sewer	()
Does the property contain an				1 - 10 10 10 10 10 10 10 10 10 10 10 10 10		
Structures (existing or propos			Manufactured Hor		Other (energy	
			18.70		Other (specif	
nereby state that loregoing	statements are accura	te and correct to the	best of my knowledge.	Permit survect	to revocation if false i	ifications of plans submitted. Information is provided.
		er or Owner's Agen	•		2-2-2/ ite	•
to: boundary information	s responsibility to pro on, house location, u incorrect or	ovide the county wi nderground or over missing information	th any applicable info	rmation about The county or thin these appli	the subject property its employees are n	y, including but not limited tot responsible for any

APPLICATION CONTINUES ON BACK

strong roots - new growth



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)

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.

Environmental Health Existing Tank Inspections

Follow above instructions for placing flags and card on property.

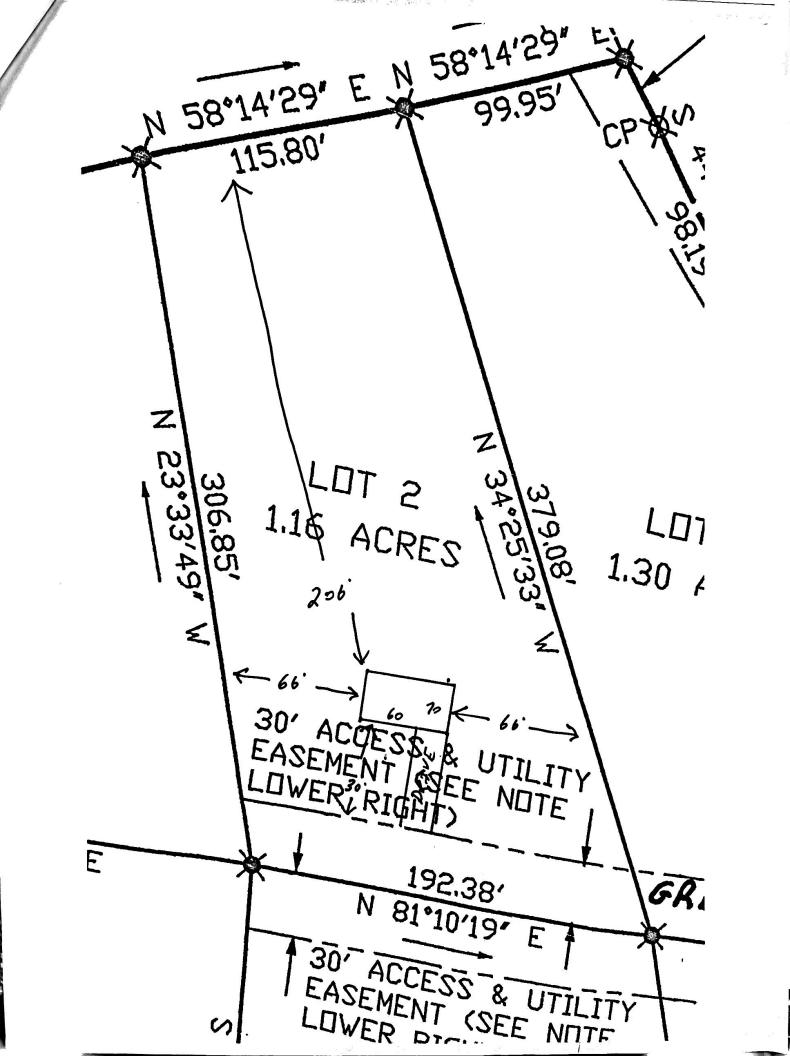
Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)

DO NOT LEAVE LIDS OFF OF SEPTIC TANK

SEPTIC "MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"					
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	1				
{ } Accepted { } Innovative { Liconventional { } 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 question. If the answer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	' in				
{ }YES { YNO Does the site contain any Jurisdictional Wetlands?	. 3%				
{ }YES { }NO Do you plan to have an irrigation system now or in the future?	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?	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? Divews easements					
{ }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.					
Have Read This Application And Certify That The Information Provided Herein Is Toron Complete And C					

iplete 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.

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Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is falsified, changed, or the site is altered, then the Well Construction Permit shall become <u>invalid</u>.

invalid.
<u>APPLICANT INFORMATION</u>
Harrington Propostris of NC, LLC (919) 770-5969
Harington Propostries of NC, LLC (9/9) 170-5969 Applicant/Owner Phone Number 2659 San Lea Driede Sanfard, NC 27333 Street Address City State 7in Code
Street Address, City, State, Zip Code
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show: 1. existing and/or proposed property lines and easements with dimensions; 2. the location of the facility and appurtenance; 3. the location for the proposed well; 4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet or the proposed well; 5. the location of any existing wells within 100 feet of the property; surface water bodies; 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 100 feet of the proposed well site.
The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction: 1. there is a relocation of the proposed facility; 2. there is a change in the intended use of the facility; 3. there is a read for installing the way to see the second of the proposed facility;
 there is a need for installing the waste water system in an area other than indicated on the well permit, or there are landscape changed that affect site drainage.
Contact information: Environmental Health Division - 910-893-7547
PROPERTY INFORMATION
Proposed use of well Single-Family ■ Multifamily □ Church □ Restaurant □ Business □ Irrigation □
Street Address LOT Seminola Road Subdivision/Lot # 2 Parcel # PIN #
Directions to the Site 421 towards Sanford At intersection of 42/ + Seminola Rolling 15 to 44 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.

I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a will can be properly constructed according to the permit.

Property Owner's of Owner's L. I.B.

7-2-202/