

Initial Application Date: 11/15/18

Application # ERESI811-0028

CU#_

	Central Permitting	108 E. Front Street, Lilling	ton, NC 27546 Phone: ((910) 893-2793 www.harnett.org/permits
	**A RECORDED SUR	RVEY MAP, RECORDED DEED	(OR OFFER TO PURCHASE) & S	ITE PLAN ARE REQUIRED WHEN	SUBMITTING A LAND USE APPLICATION™
LAN	DOWNER: Thomas	Stone	Mailing	Address: 114 Esther S	Stone Lane
City	Coats	State: NC	Zip: 27521 Contact N	o: 910-890-2711	Email: tomthumb1@embarqmail.com
APF	PLICANT*: Energy C	Conservation Solution	ONS Mailing Address: 11	6 Gasoline Alley Su	ite 105
City	.: Mooresville ase fill out applicant informa	state: NC	Zip: 28117 Contact N	o: <u>704-230-0498</u>	Email: mloper@ecs.solar
		NG IN OFFICE: Marian			#704-230-0498 ext.127
				PIN: 0599-69-8186.00	
DE	ED OR OTP: 1212	: 679			
PR	OPOSED USE:				
	SFD: (Sizex			n): Garage: Deck: _ a closet? () yes () no (if	Crawl Space: Slab: Monolithic Slab: Slab: yes add in with # bedrooms)
	Mod: (Sizex) # Bedrooms # Bat (Is the second floor finis	hsBasement (w/wo bat hed? () yes () no A	h) Garage: Site Buil ny other site built additions? (It Deck: On Frame Off Frame yes () no
	Manufactured Home:	SW DW TW (Sizex) # Bedi	ooms: Garage:(site	built? Deck: site built?
	Duplex: (Sizex_) No. Buildings;	No. Bedrooms	Per Unit:	-
	Home Occupation: # F	Rooms:Us	se:	Hours of Operation:	#Employees:
Ø	Addition/Accessory/Ot	her: (Size 20ft x 10.4ft)	Jse: Ground Mounted	d Solar Panel Array	Closets in addition? () yes () no
Sev	wage Supply: New (Complete es owner of this tract of	v Septic Tank Expans Environmental Health Che land, own land that contain	(Need to Complete Nesion Relocation Excision other side of application Relocation	ew Well Application at the sam xisting Septic Tank Cou ation if Septic) nin five hundred feet (500') of	ust have operable water before final ne time as New Tank) inty Sewer tract listed above? () yes () no
					On the foreign visit
					Other (specify): ch work and the specifications of plans submitted. to revocation if false information is provided.
	It is the owner/applical	Signature of Owner ints responsibility to provation, house location, und incorrect or m *This application ex	of Owner's Agent ide the county with any ag lerground or overhead eas issing information that is	pplicable information about sements, etc. The county or contained within these applinitial date if permits have no	ate the subject property, including but not limited its employees are not responsible for any ications.***

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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.

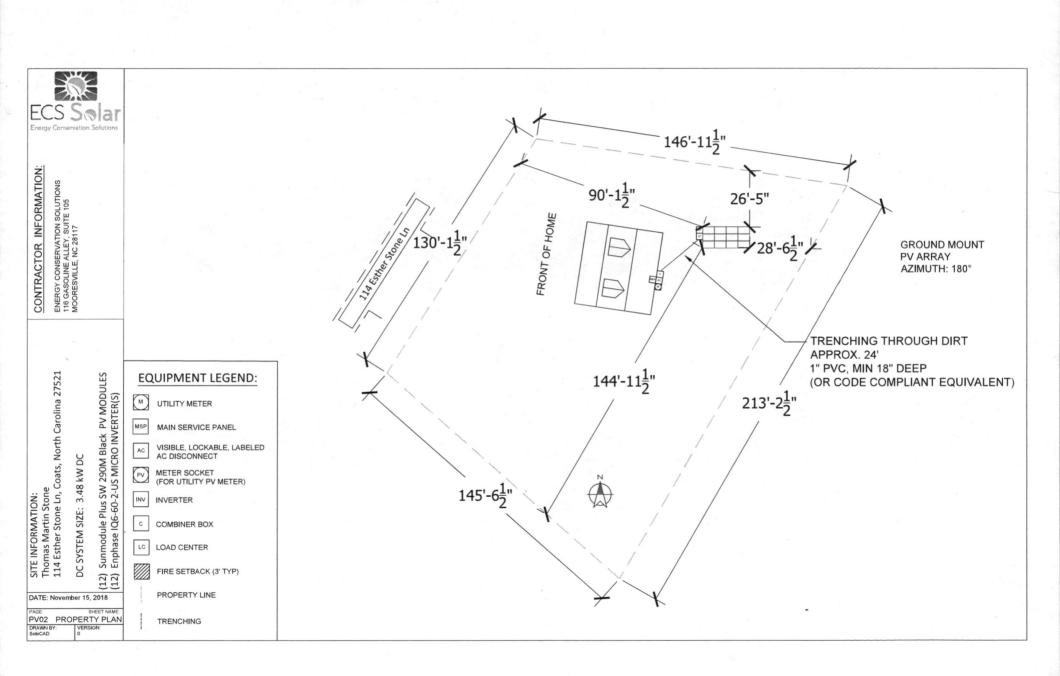
Environmental Health Existing Tank Inspections

- 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

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

STOKE ENTORMATION MAT BE REQUIRED TO COMPLETE ANT ENSECTION	
<u>SEPTIC</u>	
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 question. If the answer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	to the property in
{_}}YES {_\overline{\bullet}} NO Does the site contain any Jurisdictional Wetlands?	
{_}}YES {}NO Do you plan to have an <u>irrigation system</u> 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 {YNO	
{}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. Author	rized 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	s And Making The Site
Accessible So That A Complete Site Evaluation Can Be Performed	

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ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. Also, in order to receive a Privilege License from the Town of Coats to open a business, you must have a valid Zoning Permit, along with all applicable inspections from Harnett County.

Permit No.: 67 11-15-18- Date: 11/15/18	Fee: \$50
A CONTRACTOR OF THE CONTRACTOR	Area Zoned As: Residential Agriculture - Coats
APPLICANT:	PROPERTY OWNER:
Name (Print) Energy Conservation Solutions	Name Thomas M. Stone
Address 116 Gasoline Alley Ste.105	Address 114 Esther Stone Lane
City, State Mooresville, NC	City, State Coats, NC
Cip Code 28117	Zip Code 27521
hone # 704-230-0498 ext.127	Phone #
ocation of Property: IN-TOWN	ETJ X ETJ (contiguous)
resent Use of Property: Single Family Dwelling	
Multi Family Dwelling: # of Units:	# Bedrooms: Square Feet: Square Feet (per unit)
Multi Family Dwelling: # of Units: Mobile Home (single lot): Single wide: Mobile Home Park: Section 16, Zoning Ordi Business: Total # of employees production of the control	#Bedrooms (per unit): Square Feet (per unit) Double Wide: inance must apply per day Type of business
Multi Family Dwelling: # of Units: Mobile Home (single lot): Single wide: Mobile Home Park: Section 16, Zoning Ordi Business: Total # of employees p Others (specify): Ground Mounted Solar PV Sy Existing structure: Renovate:	#Bedrooms (per unit): Square Feet (per unit) Double Wide: inance must apply per day Type of business ystem
Multi Family Dwelling: # of Units: Mobile Home (single lot): Single wide: Mobile Home Park: Section 16, Zoning Ordi Business: Total # of employees p Others (specify): Ground Mounted Solar PV Sy Existing structure: Renovate: ATER AND SEWER SUPPLY: Water: Private	#Bedrooms (per unit): Square Feet (per unit) Double Wide: inance must apply per day Type of business ystem Addition: Demolish:
Multi Family Dwelling: # of Units: Mobile Home (single lot): Single wide: Mobile Home Park: Section 16, Zoning Ordi Business: Total # of employees p Others (specify): Ground Mounted Solar PV Sy Existing structure: Renovate: VATER AND SEWER SUPPLY: Water: [] Private [Sewer: [] Private [pplicant: I certify that all of the information presentest of my knowledge. False information is grounds for	#Bedrooms (per unit): Square Feet (per unit) Double Wide: inance must apply per day
Multi Family Dwelling: # of Units: Mobile Home (single lot): Single wide: Mobile Home Park: Section 16, Zoning Ordit Business: Total # of employees produced Mounted Solar PV Sy Common Mounted Solar PV Sy Existing structure: Renovate: WATER AND SEWER SUPPLY: Water: [] Private [Sewer: [#Bedrooms (per unit): Square Feet (per unit) Double Wide: inance must apply per day Type of business ystem Addition: Demolish: Public [] Proposed [] Existing] Public [] Proposed [] Existing ted in this application is true, complete, and accurate to the
Multi Family Dwelling: # of Units: Mobile Home (single lot): Single wide: Mobile Home Park: Section 16, Zoning Ordi Business: Total # of employees p Others (specify): Ground Mounted Solar PV Sy Existing structure: Renovate: WATER AND SEWER SUPPLY: Water: [] Private [] Sewer: [] Private [] pplicant: I certify that all of the information present est of my knowledge. False information is grounds for ignature: Marianne Loper	#Bedrooms (per unit): Square Feet (per unit) Double Wide: inance must apply per day

TOWN OF COATS 25 EAST MAIN STREET COATS NC 27521 910-897-5183

Terminal ID: *****997

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11/15/18

1:42 PM

VISA - MANUAL

ACCT #: ***********5241

CREDIT SALE

UID: 831930683102 REF #: 5493 BATCH #: 392 AUTH #: 07443G

AVS; Z

AMOUNT

\$50.00

APPROVED

AGREE TO PAY THE ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT (MERCHANT AGREEMENT IF CREDIT VOUCHER)

MERCHANT COPY