

Initial Application Date:		Ap	olication #	
	COUNTY OF HARNETT RE	SIDENTIAL LAND USE APPLIC	CU#	
Central Permitting 108 E. Front S		Phone: (910) 893-7525 ext:2		org/permits
	RDED DEED (OR OFFER TO PURC	CHASE) & SITE PLAN ARE REQUIRE	O WHEN SUBMITTING A LAND USE APPLIC	ATION**
LANDOWNER: Christopher Wegner		_ Mailing Address: 325 Victor	ria Hills Dr	
City:	State: NC Zip: 27526 C	919-616-3620 ontact No:	Email: skysarchery@yahoo.co	om
APPLICANT*: Jonathan High	Mailing Addre	ess: 2517 Atlantic Ave		_
City: Raleigh *Please fill out applicant information if different th	State: NC Zip: 27604 C	ontact No: 919-833-9096		v.com
Zoning: Flood: Pack:			=	
Setbacks – Front: Back: PROPOSED USE:	Side:Corner:		-	
□ SFD: (Sizex) # Bedroom TOTAL HTD SQ FTGARAGE SQ I bedrooms)			eck: Crawl Space: Slab:	
□ Modular: (Sizex) # Bedro TOTAL HTD SQ FT □ Manufactured Home:SWDW	_ (Is the second floor finishe	ed? () yes () no Any othe	er site built additions? () yes () n	0
□ Duplex: (Sizex) No. Build				
☐ Home Occupation: # Rooms:	Use:	Hours of Operation:	#Employee	es:
Addition/Accessory/Other: (Size		ed Solar Panels	Closets in addition? ()	yes () no
TOTAL HTD SQ FT G	ARAGE			
Does owner of this tract of land, own land the	(Need to Con Expansion Relocatio Health Checklist on other side of the contains a manufactured h	of application if Septic) ome within five hundred feet (50	_ County Sewer	
Does the property contain any easements v				
Structures (existing or proposed): Single fa				
If permits are granted I agree to comform to I hereby state that foregoing statements are	accurate and correct to the b	est of my knowledge. Permit su	bject to revocation if false information i	plans submitted. s provided.
Sidnatura	of Owner or Owner's Agen		4/2021 Date	
It is the owner/applicants responsibil to: boundary information, house loc inco	ity to provide the county wilt cation, underground or overl rrect or missing information	h any applicable information a	bout the subject property, including ity or its employees are not respons applications.	but not limited blue for any

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)

Environmental Health New Septic System

- <u>All property irons must be made visible</u>. 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"

<u>SEPTIC</u>				
If applying for a	uthorization	n to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{}} Accepted	l	{} Innovative {} Conventional {} Any		
{}} Alternation	ve	{}} 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 <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	_} 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.		
TIT D 1001				

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.