

Initial Application Date

*Please fill out applicant information if different than landowner

Manufactured Horne: ___SW ___DW ___TW (Size_

Duplex: (Size ____x___) No. Buildings:__

Home Occupation: # Rooms:___

Addition/Accessory/Other: (Size _

Central Permitting

APPLICANT*:

Setbacks - Front: PROPOSED USE: SFD: (Size

TOTAL HTD SQ FT

TOTAL HTD SQ FT

Modular: (Size

plication Date	S. 16.22 Application # BRES 2205.0027
al Permitting	CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits
	SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
NER:	way State: NC zip: 27505 Contact No: 910 514 3675 Email: Andrewbyie @gmail.com
Broad	way State: NCzip: 27505 Contact No: 910 514 3675 Email: Andrewbyie @gmail, con
NT*:	Mailing Address:
s: 104	State: Zip: Contact No: Email:
- Front:	Back:Corner:
SED USE: (Size) TD SQ FT	Monolithic x) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: GARAGE SQ FT (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
ular: (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
ufactured Hor	ne:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
lex: (Size	x) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT

New Well (# of dwellings using well _____) *Must have operable wa (Need to Complete New Well Application at the same time as New Tank)) *Must have operable water before final County Existing Well

Expansion ___ Relocation V Existing Septic Tank ___ County Sewer Sewage Supply

(Complete Environmental Health Checklist on other side of application if Septic) Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? (__) yes (__) no N/A

Does the property contain any easements whether underground or overhead (___) yes

Other (specify): Structures (existing or proposed): Single family dwellings If permits are granted agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted.

I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent

Date

Closets in addition? (___) yes (___) no

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

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)

□ Env	ironmental He	ealth New Septic System
		ons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must place approximately every 50 feet between corners.
		house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, ou
	buildings, swim	nming 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.
		ckly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation d. 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 unco	over outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
	Environmenta	Health Existing Tank Inspections
		nstructions for placing flags and card on property.
•	Prepare for ins and then put li	pection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (<i>if possible</i>) d back in place . (Unless inspection is for a septic tank in a mobile home park) ELIDS OFF OF SEPTIC TANK
	DO NOT LEAVE	
SEPTIC		"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"
	ng for authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Ac	ccepted	{_}} Innovative {} Conventional {}} Any
{} Al	ternative	{}} Other
		the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES	{_}} NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	{_}} NO	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?
{}}YES	{}} NO	Is the site subject to approval by an 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.
I Have Re	ad This Applicat	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State
Officials A	Are Granted Righ	at Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. 1
Understa	nd That I Am Sol	ely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site
Accessible	So That A Com	plete Site Evaluation Can Be Performed.