

Initial Application Date:	Application #				
		RESIDENTIAL LAND USE A	PPLICATION		
Central Permitting 108 E. Front Street	, Lillington, NC 27546	Phone: (910) 893-7525 ex	t:2 Fax: (910) 893-2793	www.harnett.org/permits	
A RECORDED SURVEY MAP, RECORDED	•	•		AND USE APPLICATION	
LANDOWNER: Michael Durrance		Mailing Address:111 L	ongleaf Pine Way		
City: Sanford State	e: NC Zip: 27332	_ Contact No:9193537306	Email: cobaltpitt	oull@gmail.com	
APPLICANT*: BRS Field Ops, LLC	Mailing A	ddress:			
Orem City: State *Please fill out applicant information if different than lar	e:_UT_Zip:_84097	_ Contact No:385-482-004	Email: permitting.c	department@blueravensolar.com	
ADDRESS: 111 Longleaf Pine Way, Sanfor					
Zoning: Flood: Wate			-		
Setbacks – Front: Back: S	ide: Corne	r:			
PROPOSED USE:				Monolithic	
SFD: (Sizex) # Bedrooms:		· · · · · · · · · · · · · · · · · · ·		: Slab: Slab:	
TOTAL HTD SQ FT GARAGE SQ FT	(Is the bonus roo	m finished? () yes () no	w/ a closet? () yes () r	o (if yes add in with # bedrooms	
☐ Modular: (Sizex) # Bedrooms	# Baths Bas	ement (w/wo bath) Garag	e: Site Built Deck:	On Frame Off Frame	
TOTAL HTD SQ FT (· · · · · · · ·			
□ Manufactured Home:SWDW	_TW (Sizex_) # Bedrooms: Gara	ge:(site built?) Deck	c:(site built?)	
☐ Duplex: (Sizex) No. Buildings:	: No	o. Bedrooms Per Unit:	TOTAL HTD	SQ FT	
☐ Home Occupation: # Rooms:	Use:	Hours of Operatio	n:	#Employees:	
) Use: 9.24 kW	PV Solar Panel Installation	on Roof Closets in	addition?() yes () no	
TOTAL HTD SQ FT GARA				<u> </u>	
					
Water Supply: County Existing V	VellNew Well	(# of dwellings using well) *Must have operab	le water before final	
Sewage Supply: New Septic Tank E	xpansion Reloc	Complete New Well Application ationExisting Septic Tank		ank)	
(Complete Environmental Health Does owner of this tract of land, own land that or	n Checklist on other si	ide of application if Septic)		?()ves ()no	
Does the property contain any easements wheth			,	<u> </u>	
Structures (existing or proposed): Single family	-		Other (en	o cifu)	
If permits are granted I agree to conform to all o I hereby state that foregoing statements are acc					
Lacy Hollid	ay Perr	mitting Coordinator	11 / 02 / 2023		
Lacy Hollid Signature of C	wher or Owner's Ac	gent	Date	orty including but not limited	
***It is the owner/applicants responsibility to to: boundary information, house location	n, underground or o	<mark>verhead easements, etc. The</mark>	county or its employees a		
		tion that is contained within to the second the initial date if perm			

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

- <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 authoriza	tion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
{}} Accepted	{} Innovative {} Conventional {} Any				
{}} Alternative	{}} Other				
	fy the local health department upon submittal of this application if any of the following apply to the property in is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:				
{}}YES	Does the site contain any Jurisdictional Wetlands?				
{}}YES	Do you plan to have an <u>irrigation system</u> now or in the future?				
{}}YES	Does or will the building contain any <u>drains</u> ? Please explain				
{}}YES	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{}}YES	Is any wastewater going to be generated on the site other than domestic sewage?				
{}}YES	Is the site subject to approval by any other Public Agency?				
{}}YES	Are there any Easements or Right of Ways on this property?				
{}}YES	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.

Αрі	olication#	

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

	Michael Durrance		Phone: 9193537306
Owner (s) Mailing Address	: 111 Longleaf Pine \	Way, Sanford , North Carolin	a, 27332
Land Owner Name (s):^	Michael Durrance	F	Phone: 9193537306
Construction or Site Addre	ess: 111 Longleaf Pin	e Way, Sanford , North Caro	lina, 27332
Job Cost: 8336.33 Do	escription of Work to	be done	
9.24	kW PV Solar Panel	Installation on Roof	
			c Gas Piping Other
		ervice Change Service rs we need the premise n	ce Reconnect Other <u> </u>
Plumbing: Water/Sev	wer Tap Nu	mber of Baths W	/ater Heater
Specific Directions to Job t	rom Lillington:		
I BRS Field Ops, LLC (Contractors Nam	will provide the	Residential Solar PV (Trade	labor on this structure. e)
I am the building owner or	my NC state license	e number is <u>U.35958</u>	, which entitles me to
perform such work on the	above structure lega	ally. All work shall comply	with the State Building Code and all
other applicable State and	local laws, ordinand	ces and regulations.	•
BRS Field Ops, LLC			385-482-0045
Contractor's Company Na	me		Telephone
1403 N Research Way, Ore	m, UT 84097		permitting.department@blueravensolar.com
Address			Email Address
U.35958			
License #			
Structure Owner / Contrac	tor Signature:	Lacy Holliday Permittin	Date: 11 / 02 / 2023
, , , , , , ,	,	have obtained permission	from the above listed license holder to stand that you cannot rent, lease or sel

*Company name, address, & phone must match information on license

the listed property for 12 months after completion of the listed work.