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nitial Application Date:	4-7	7-11	

Application #	1150026423
	BA-(11 11-11

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" Mailing Address: 2015 Jones boro Rd State: NC Zip: 28334Corrtact No: (916) 891-4652 Email: work# 1919/294-4170 -APPLICANT* City: Contact No: Email hades Phone # (910) 891 - 4657 CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: Charles Rankfait Lot #: State Road Name: Jonestono Road PINO 1537-15-5171.000 Watershed: NA Deed Book & Page: 2084, 160 Power Company*: *New structures with Progress Energy as service provider need to supply premise number _ PROPOSED USE: Monolithic SFD: (Size ____x___) # Bedrooms:__ # Baths:__ Basement(w/wo bath):___ Garage:__ Deck:__ Crawl Space: (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms) Mod: (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 Manufactured Home: J SW __DW __TW (Size_14 x_76) # Bedrooms: 2 Garage: __(site built?___) Deck:___(site built?___) Duplex: (Size ____x___) No. Buildings:_____ No. Bedrooms Per Unit:_ Home Occupation: # Rooms: _____ Use: ____ _____ Hours of Operation:____ Addition/Accessory/Other: (Size x) Use: Closets in addition? (__) yes (__) no Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well _______) *Must have operable water before final Sewage Supply: ____ New Septic Tank (Complete Checklist) ____ Existing Septic Tank (Complete Checklist) ____ County Sewer 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 Does the property contain any easements whether underground or overhead (___) yes (___) no Structures (existing or proposed): Single family dwellings: Manufactured Homes: \ \ Over 500 Other (specify): Required Residential Property Line Setbacks: Front Rear Closest Side Sidestreet/corner lot Nearest Building on same lot Residential Land Use Application Page 1 of 2 03/11 APPLICATION CONTINUES ON BACK

Confid 4/7/4 Rec'd 4/8/1

PECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON Take US 421 toward Dum to Ne HWF 27
Approx Imile befor Berson turn right on Hodges Chapel Rel. Cross over
15 301 and proved to the rest stop Sign. Turn right on Joanshow Rd and
15 301 and proved to the rest stop sign. Turn right on Jones box Rd and band is approx 12 mile on right across from Jones box Books to chorch
perm ts are granted agree to conform to all ord nances and laws of the State of North Ca ol na regulating sich work and the specifications of plans submitted
ereby state that foregoing statements are accurate and correct to the best of my knowledge Permit subject to revocation if false information is provided
Charles Danald Barycon 4-7-11 Signature of Owner or Owner's Agent Date

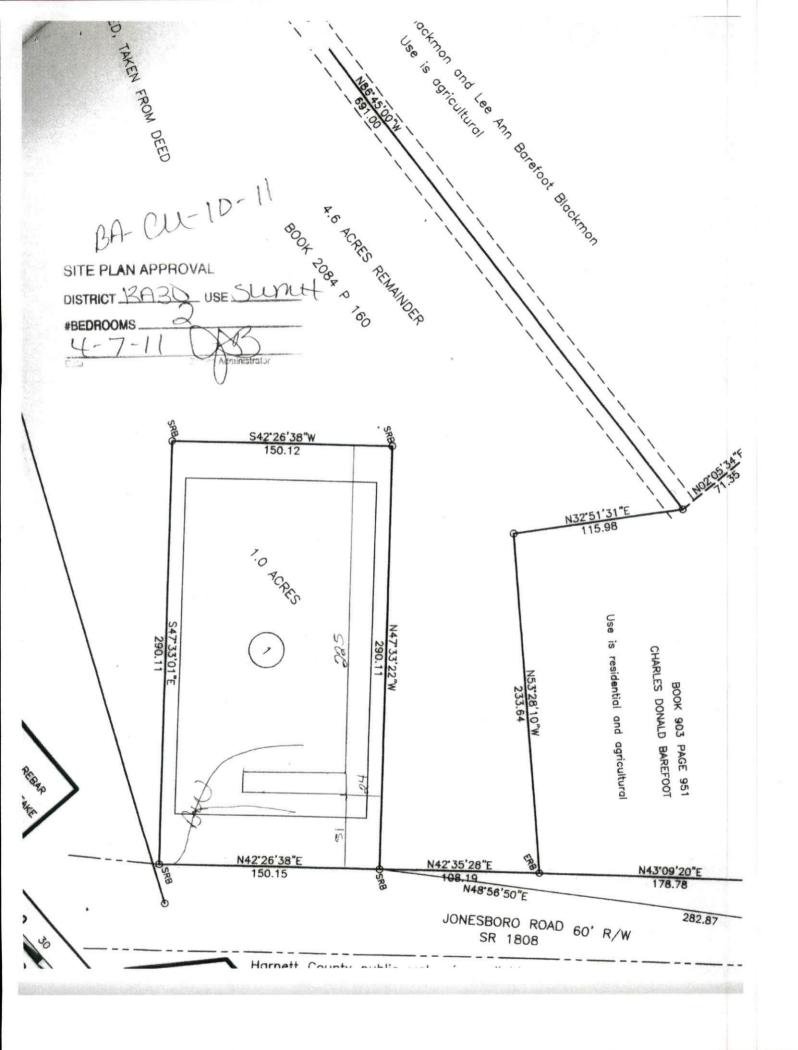
It is the owner/applicants responsibility to provide the county with any applicable information about the subject property including but not limited to boundary info mation house location inderground or one head easements etc. The country information that is contained within these applications.

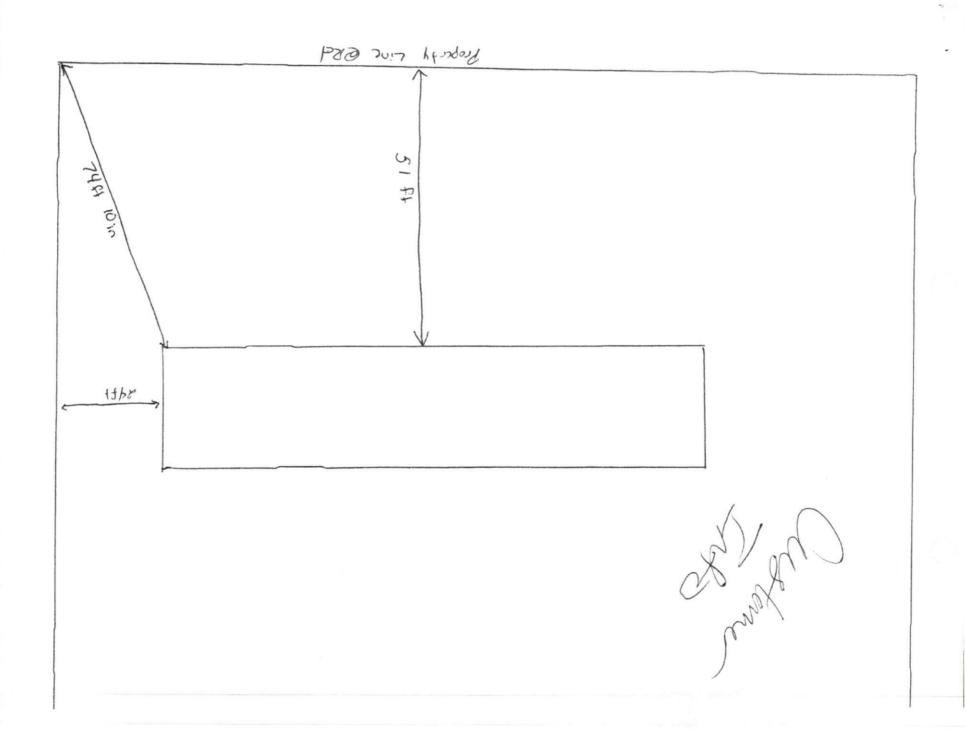
*This application expires 6 months from the initial date if permits hall einot been issued

NAME: Charles Barefeof

APPLICATION #: 1150026423

	,	*This application to be filled out when applying for a septic system inspection.*
Cou	nty Health De	epartment Application for Improvement Permit and/or Authorization to Construct
IF THE I	NFORMATION IN	THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
PERMIT	OR AUTHORIZA	TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration
dependin	910-893-7525 c	ion submitted. (Complete site plan = 60 months; Complete plat = without expiration) option 1 CONFIRMATION # 15 48 4
En		alth New Septic System Code 800
N.		ons must be made visible. Place "pink property flags" on each corner iron of lot. All property
	lines must be c	learly flagged approximately every 50 feet between corners.
		nouse corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,
	out buildings, s	wimming pools, etc. Place flags per site plan developed at/for Central Permitting.
•		invironmental Health card in location that is easily viewed from road to assist in locating property.
•	If property is thi	ickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil
	evaluation to be	e performed. Inspectors should be able to walk freely around site. Do not grade property.
•	All lots to be a	ddressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
	for failure to u	ncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
•	After preparing	proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code
		cting notification permit if multiple permits exist) for Environmental Health inspection. Please note
		mber given at end of recording for proof of request. or IVR to verify results. Once approved, proceed to Central Permitting for permits.
		alth Existing Tank Inspections Code 800
•		estructions for placing flags and card on property.
		pection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if
		nen put lid back in place . (Unless inspection is for a septic tank in a mobile home park)
•		LIDS OFF OF SEPTIC TANK
•		g outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
		nits, then use code 800 for Environmental Health inspection. Please note confirmation number
		recording for proof of request.
SEPTIC		or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
		on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
3 3		
		{_}} Innovative {} Conventional {}} Any
{_}} A	lternative	{} 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:
{}}YE	s {★} NO	Does the site contain any Jurisdictional Wetlands?
{}}YE	S {X} NO	Do you plan to have an irrigation system now or in the future?
{}}YE	S {X} NO	Does or will the building contain any drains? Please explain.
{}}YE		Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YE		Is any wastewater going to be generated on the site other than domestic sewage?
{_}}YE		Is the site subject to approval by any other Public Agency?
{_}}YE		Are there any Easements or Right of Ways on this property?
{_}}YE	S {X} 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.
		ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
		Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
		olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
C	rales Do	analed Sanfact A Complete Site Evaluation Can Be Performed. 4-7-11
PROPE	RTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE



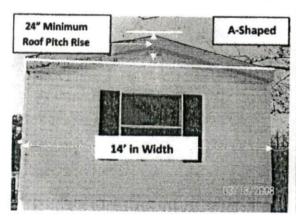


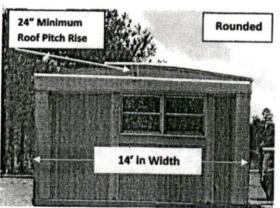
PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, <u>Charles Barefoot</u>, understand that because I'm located in a RA-20R or RA-20M Zoning District and wish to place a manufactured home in this district I must meet the following criteria, verified by zoning inspection approval, before I will be issued a certificate of occupancy for this home.

 The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See Illustrations Below.)





Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)



Continued.....

11011	CU-09-11. Lucas, William, Judy & Jeffrey/ Jeff Lucas. A Singlewide Manufactured ne in a RA-30 Zoning District; Out of Pin # 0528-48-4014.000; Upper Little River nship; SR # 1250 (Tim Currin Road).
1.	The requested use will will not impair the integrity or character of the surrounding area for the following reasons: This is an allowed C.U., to apposition a family project, Swith who area.
2.	The requested use will / will not be detrimental to the public health, morals, or welfare for the following reasons: forcest testified that 5-0 this will be a private, family residence.
3.	Adequate utilities, access roads, drainage, sanitation and/or other necessary facilities have have not been made or are being provided for the following reasons: As per application trash; water, + private septic will adequate, be taken care of.
4.	Adequate measures have have not been or will be taken to provide ingress and egress so designed as to minimize traffic congestion in the public streets for the following reasons: This private home will be
5.	The conditional use shall shall not, in all other respects, conform to the applicable regulations of the district in which it is located, except as such regulations may, in each instance, be modified by the Board of Adjustment for the following reasons: Allowed C. U. has pissed all previous fundings.
Cond	- No brick underground
30 Zoi	U-10-11. Barefoot, Charles Donald. A Singlewide Manufactured Home in a RA- ning District; Pin # 1537-15-5171.000; Averasboro Township; SR # 1808 boro Road).
1.	The requested use will / will not impair the integrity or character of the surrounding area for the following reasons: Mostly firmland around 51te that 15 owned by applicant.

2.	The requested use will will not be detrimental to the mublic books	
	The requested use will will not be detrimental to the public health, morals, or welfare for the following reasons: Allowe & C.U., no oppose	sitio
2	Single tamily dwelling that will blend w/ area.	
3.	Adequate utilities, access roads, drainage, sanitation and/or other	
	necessary facilities have have not been made or are being provided for	5-1
	the following reasons: Applicants will take trash aways	
	access will be directly to Sizg atamage is adequate.	
4.	Adequate measures have have not been or will be taken to provide	5-
	ingress and egress so designed as to minimize traffic congestion in the	/
	public streets for the following reasons: home will be used as a	
_	tarryly use with minimal traffic.	
5.	The conditional use shall/shall not, in all other respects, conform to the	
	applicable regulations of the district in which it is located, except as such	
	regulations may, in each instance, be modified by the Board of Adjustment	5-
	for the following reasons:)
	Passed previous findings, allowed C.U.	
	Adhere to Ordinance Standards AASS	
	Adhere to Ordinance Standards	
BA-C Distri 421).	CU-11-11. Brown, Georgia Lee. A Small Engine Repair in a RA-30 Zoning ict; Pin # 0610-96-7539.000; Upper Little River Township; SR # 1291 (Old US	
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