

Initial Application Date: 11-10-11

Application # 1150027847 ①

CU# \_\_\_\_\_

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"

LANDOWNER: Calvin A. McNeill Mailing Address: 2195 Bailey Rd

City: Coats State: NC Zip: 27526 Contact No: \_\_\_\_\_ Email: calvin.a.mcneill  
@us. Army.mil

APPLICANT\*: Same Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Calvin McNeill Phone # 910-591-8432

PROPERTY LOCATION: Subdivision: Elizabeth Norelan Lot #: 1 Lot Size: 2.00 AC

State Road # 1561 State Road Name: Bailey Rd Map Book & Page: 2002, 1563

Parcel: 071610 0103 PIN: 1610-48-71001000

Zoning: R200M Flood Zone: X Watershed: NA Deed Book & Page: 1719, 15 Power Company\*: \_\_\_\_\_

\*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

PROPOSED USE:

SFD: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ # Baths: \_\_\_\_\_ Basement(w/wo bath): \_\_\_\_\_ Garage: \_\_\_\_\_ Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ Slab: \_\_\_\_\_  
(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: \_\_\_\_\_ SW  DW \_\_\_\_\_ TW (Size 28 x 66) # Bedrooms: 3 Garage: \_\_\_\_\_ (site built? \_\_\_\_\_) Deck: \_\_\_\_\_ (site built? \_\_\_\_\_)

Duplex: (Size \_\_\_\_\_ x \_\_\_\_\_) No. Buildings: \_\_\_\_\_ No. Bedrooms Per Unit: \_\_\_\_\_

Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: \_\_\_\_\_

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: 1 proposed in the R200M zoning side Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>100</u>
Rear		<u>35</u>		<u>190</u>
Closest Side		<u>10</u>		<u>23</u>
Sidestreet/corner lot				
Nearest Building on same lot				

Comments: \_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Take Hwy 27 toward Benson  
out of Coats Make Left on Bailey Rd go 1 mile  
property on Right.

If permits are granted I 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.

*Calvin H. Miller*

Signature of Owner or Owner's Agent

10 Nov 11

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 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\*\*

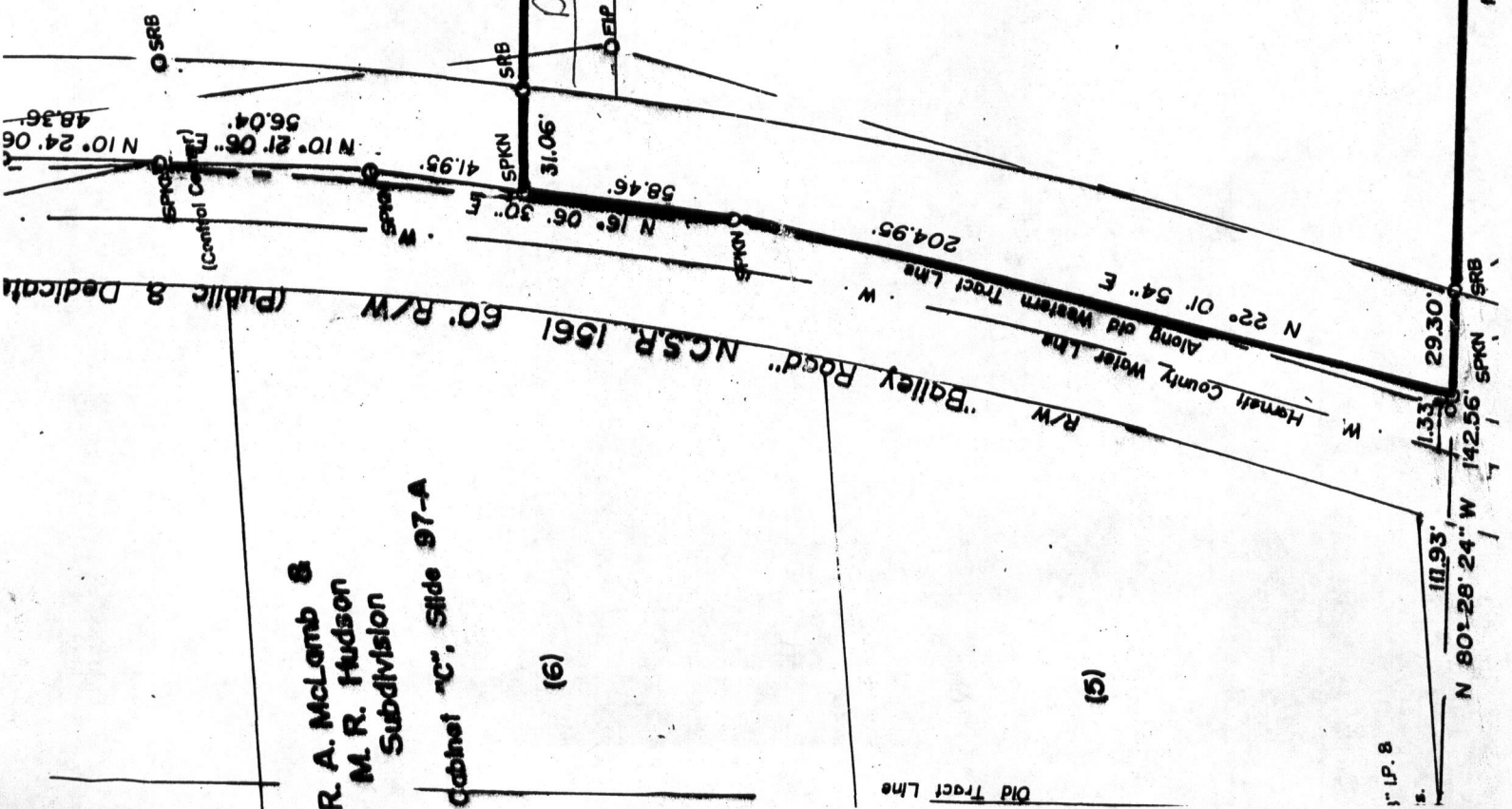
3.94+ Acres by

SITE PLAN APPROVAL

DISTRICT RRZOM USE DWMT

#BEDROOMS 3

11-10-11  
[Signature]  
Zoning Administrator



R. A. McLamb &  
M. R. Hudson  
Subdivision  
Cabinet "C", Slide 97-A

(6)

(5)

Old Tract Line

1" LP. 8

N 80° 28' 24" W 142.56' SPKN SRB

1.33' 29.30'

N 22° 01' 54" E

204.95'

N 16° 06' 30" E 58.46'

N 10° 21' 06" E 56.04'

N 10° 24' 06" E 48.36'

31.06'

SRB

SRB

5 31' 21 04" E

361.65'

25 25 66  
33059  
Drive  
DEP

Parcel (11)

2.19 Acres Road R/W  
0.19 Acre Road R/W

2.00 Acres Net

190

260.00'

S 16° 23' 11" W

N 80° 21' 04" W

350.20'

Fid. Angle 15. West of Branch of Cartwright

NAME: Calvin A. McNeil

APPLICATION #: 11500 27847 (1)

**\*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)

910-893-7525 option 1

CONFIRMATION # \_\_\_\_\_

**Environmental Health New Septic System** Code 8 00

- **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 undergrowth 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.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection. **Please note confirmation number given at end of recording for proof of request.**
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

**Environmental Health Existing Tank Inspections** Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over over outlet end as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. **Please note confirmation number given at end of recording for proof of request.**
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

**SEPTIC**

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 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 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 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.

**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.**

Calvin A. McNeil

10 Nov 11  
DATE

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Date: 11-10-11

Application# 1150027847

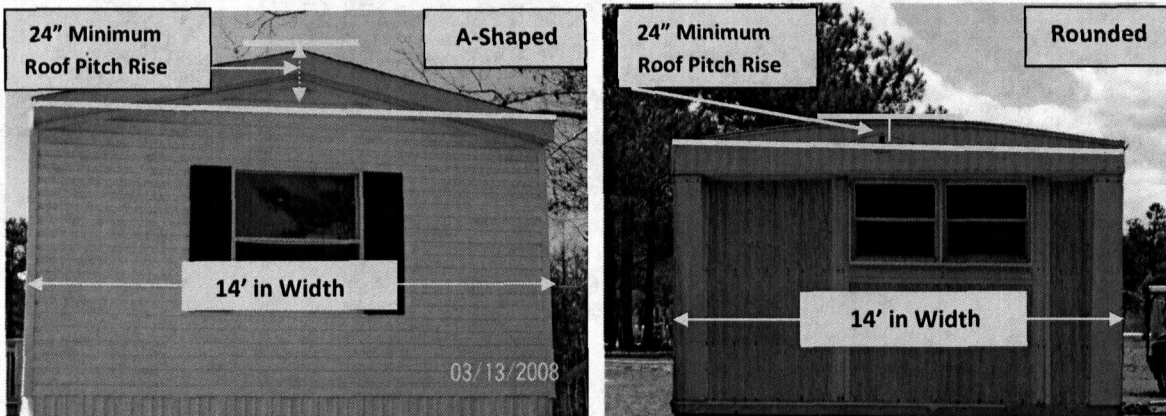
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### PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

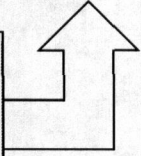
#### RA-20R & RA- 20M Certification Criteria

I, Calvin K. Myrtle, 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.

1. 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)

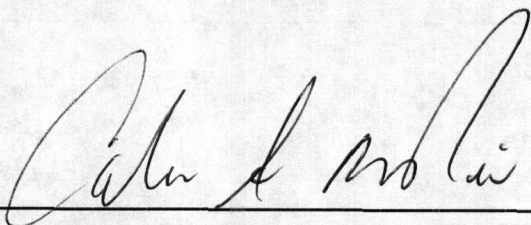
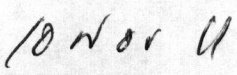


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2. The home must be underpinned, consisting of a brick curtain wall or have galvanized metal sheeting, ABS or PBC plastic color skirting with interlocking edges, installed around the perimeter of the home. Skirting shall be consistent in appearance, in good condition, continuous, permanent, and unpierced except for ventilation and access.
  
3. The homes moving apparatus must be removed, underpinned, or landscaped. (See examples below.)




4. The home must have been constructed after July 1<sup>st</sup> 1976.

Signature of Property Owner / Agent

Date

- **By signing this form the owner / agent is stating that they have read and understand the information on this form.**

 **Zoning Overlay Results**

HARNETT GIS

Zoom in  Zoom out  Pan



Map Scale = One Inch = 75

**Owner Information:**

PID	071610 0103
NAME	MCNEILL CAI
ADDRESS	2195 BAILEY
CITY/ST	COATS, NC 0
ACRES	1.942753

**Zoning Overlay Res**

ID	Zoning
65	RA-20M
343	RA-30

Download Results:

[ZoningPolygon\\_071610](#)