				<b>.</b> .
Itial Appli cation Date: 4 - 4	5-12	Application Application	on#_135	103137
		,	CU#	
Central Permitting 108 E. Front	COUNTY OF HARNETT RESIDE Street, Lillington, NC 27546 Phone		10101 000	www.harnett.org/permits
** A RECORDED SURVEY MAP, RECO	ORDED DEED (OR OFFER TO PURCHASE)	& SITE PLAN ARE REQUIRED WHEI	N SUBMITTING A LANE	USE APPLICATION**
	Y SMILEY Mailir			
TO 110 4011 110	State: DC Zip 2737 Contact N	OID OTHER	Jegrapia	01
v. Tacyency (Tre	State: O Zip 1001 Contact N	10: 910 9 17 (6) E	mail: (earna) (DA)	msmileywyd
PLICANT':	Mailing Address:	,		
/:	State: Zip: Contact N	Vo:E	mail:	•
ase fill out applicant information if different th	an landowner			
NTACT NAME APPLYING IN OFFICE:		Phone	<b>#</b>	•
<i>h</i>	1. 8			
DPERTY LOCATION: Subdivision: W	rane Jarpops	- 4	_Lot #	ot Size:
e Road # 1045 State Road	d Name: Funt In	H-11 -1	Map Book & Page:	619,
sel: (1 (5 4) (05)	PIN: 1	15 51 15	4101,00	
ng: K LOK Flood Zone: W.	/atershed: Deed Book & Pag	ge: \$ 6 / 4/3 Powe	r Companyt:	
v structures with Progress Energy as se	ervice provider need to supply premise	number	from Pro	gress Energy
			٠.	
POSED USE:				Monolithic
	:# Baths: Basement(w/wo bath room finished? () yes () no_w/ a			. —
(13 till bolles i	Cont initiation ( Target ) year ( Target ) the West	, 2/05011 () you () 110 (ii y	oo add ii) with # Dedi	ooms)
Mod: (Sizex) # Bedrooms_	# Baths Basement (w/wo bath	h) Garage: Site Built	Deck: On Fran	neOff Frame
(Is the second	floor finished? () yes () no Ar	ny other site built additions? (	_) yes () no	•
Manufactured Home: SW DW -	TW (Size 28 x 7 U) # Bedre	ooms: Garage:(site b	ulit? ) Deck: i	site huilt?
		· · · · · · · · · · · · · · · · · · ·	, · · · · · · · · · · · · · · ·	otto Dane:
luplex: (Sizex) No. Building	gs:No. Bedrooms F	Per Unit:	•	
ome Occupation: # Rooms:	Use:	Hours of Operation:	#	Employees:
ddition/Accessory/Other: (Sizex_	,			•
dultion/Accessory Cines: (GIZE	) Use:			n? () yes () no
			Closets in additio	,
Supply: Couply Existing	) Well New We'' '#of dwelling	ns using well) *Must	Closets in addition	er before final
Supply: Coupty Existing B Supply: New Septic Tank (Con	) Well New Wt" "Yol dwelling	ns using well) *Must	Closets in addition that the control of the control	er before final
Supply: Coupty Existing  B Supply: New Septic Tank (Conwer of this tract of land, own land that	Well New Wr" "Yof dwelling  mplete Checklist) Existing Ser  contains a manufactured home within	ns using well) *Must ptic Tank (Complete Checklist) n five hundred feet (500') of trad	Closets in addition that the control of the control	er before final
Supply: County Existing e Supply: New Septic Tank (Conwner of this tract of land, own land that e property contain any easements whe	) Well New Wt" "Yol dwelling	ptic Tank (Complete Checklist) In five hundred feet (500') of trac	Closets in addition that the control of the control	er before final er yes () no

Side set/corner lot : Building e lot

Go down (101 c 1 ) 1101 act to
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: (10 (10) 1) TO THE PROPERTY FROM LILLINGTON:
Elliot Bridge and two pight go over traveret pounty
bridge Tradewinds will be us your left 1268 Ellist
Drival pd will be on your vight Caccross from Drandineve
Hausing developer
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.  Thereby 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
It is a second to the county with any applicable information about the subject property including but and the first

\*\*\*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\*\*

SITE PLAN APPROVAL
DISTRICT A 2012 USE 28 X 76 DW M H
#BEDROOMS 5

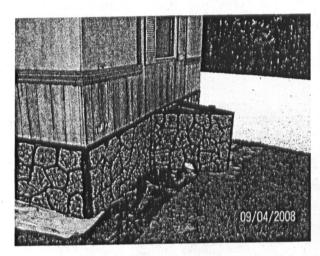
Date Zoning Administrator

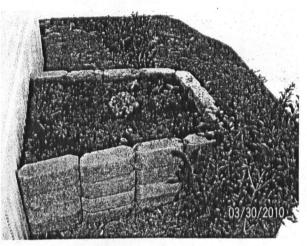
NAMES DEFFERY SMILEY

APPLICATION #:	APF	PLICA	TION	#:			
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*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 STILL IS valid for either 60 months or without expiration
A: - wood documentation submitted (Complete site plan = 00 months; Complete plat - without orpinal
1/ 910-893-7525 option 1
<ul> <li>Environmental Health New Septic System Code 800</li> <li>All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property irons must be made visible.</li> </ul>
If property is thickly wooded, Environmental Health requires that you clean out the antergrowth to allow the second of the second of the antergrowth to allow the second of
800 (after selecting notification permit if multiple permits exist) for Environmental inspection in a second of recording for proof of request.
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.
5 Environmental Health Existing Tank Inspections Code 800
<ul> <li>Follow above instructions for placing flags and cald on property.</li> <li>Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (in possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)</li> </ul>
if multiple permits, then use code 800 for Environmental Health inspection.
<ul> <li>given at end of recording for proof of request.</li> <li>Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.</li> </ul>
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 {\vec{\vec{\vec{V}}}} Any
the state of the state of the application if any of the following apply to the property in
The applicant shall notify the local health department upon submittal of this applicant 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?
, and a mile
YES (
[_]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?
WES ( 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 Sof Phat A Complete Site Evaluation Can Be Performed
A CONTRACTOR STORAGE (DECUIRED) DATE
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

- 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

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

Date: 5/23/13

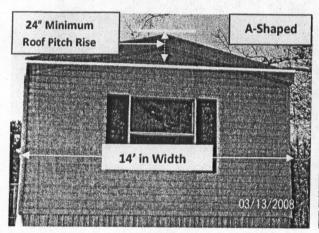
Application#	t	
Application		

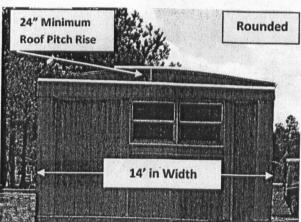
## PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

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

I, Jeffer Smile 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)

Continued.....