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Initial Application [	Date:	

Application #	1750040798
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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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

**Central Permitting** 

**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**  AND MAILING Address: 3571 US 401 W
state Cziz To Hocontact No. 14-210 Zamaii CKS pointing Combour
APPLICANT*: Some Mailing Address:
City: State: Zip: Contact No: Email:  Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: RICKY Williford Phone # 10-814-2693
PROPERTY LOCATION: Subdivision: RICKS INVESTMENT Properties Lot #: 4 Lot Size: 1195
State Road # State Road Name: Map Book & Page 2010 / 90
Parcel 070588 0094 03 PIN: 0588-68-1455,000
Zoning: <u>PA-20 M</u> Flood Zone: Watershed: Deed Book & Page: <u>9138 /912</u> Power Company*:
New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
Monolithic SFD: (Sizex) # 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: (Sizex) # 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: SWDWTW (Size x_7) # Bedrooms: Garage: (site built?) Deck: (site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) 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? (1) yes () no
Does the property contain any easements whether underground or overhead (🗹) yes (🗲 no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum 35 Actual 90
Rear 25' 145'
Closest Side 10' 48 from lasement
Sidestreet/corner lot
Nearest Building 310'

Residential Land Use Application

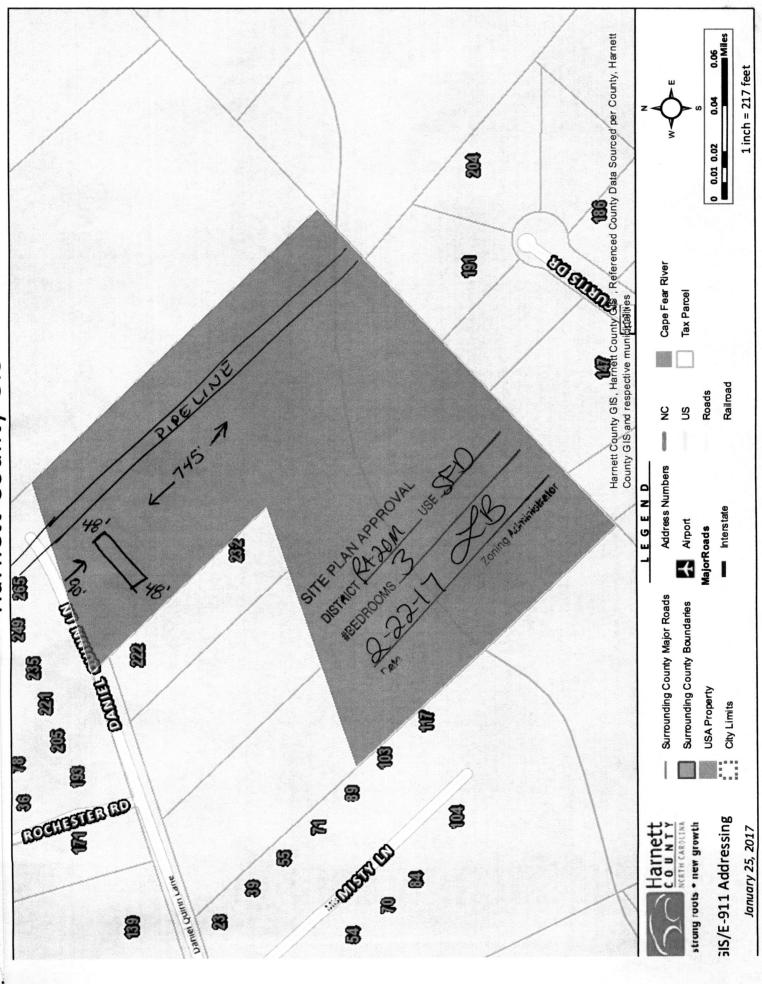
SPECIFIC DIRECTIONS TO THE	PROPERTY FROM LILLINGTON:		
421 toward	Beio Creek, vis	ent on ad Alas	erd
after 2 m	ites tern lift or	Mariel alexin	faxe.
property is	poor so bus to	on right side	,
1 , 0	0	8	
If permits are granted l'agree to co	nfolm to all ordinances and laws of the State of N lents are accurate and correct to the best of my k	North Carolina regulating such work and the sp	ecifications of plans submitted.
Thereby state that lovegoing staten	ights are accurate and correct to the dest of my	1-3-2016	e information is provided.
Si	gnature of Owner or Owner's Agent	Date	
		A Company of Physics and Physi	

<sup>\*\*\*</sup>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.\*\*\*

<sup>\*\*</sup>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."  Country Health Department Application for Improvement Permit and/or Authorization to Construct  If THE INFORMATION IN THIS APPLICATION IS PLALIFIED, CHANGE, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT  PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 acounts or vitious explication  opending upon documentation absinited. (Complete pia = 6th control. Complete pia = without explication  opending upon documentation absinited. (Complete pia = 6th control. Complete pia = without explication  ONTERMATION # ON THE THE IMPROVEMENT  I property irons must be made viable. Place *pink property flags* on each corner floor of tot. All property  lines must be clearly flagoed 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 after 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. Improperts should be able to walk treely around site. Do not grade property.  All lots be addressed within 10 businessed size settle vector configuration. 252.00 return to fee may be incurred for failures to be addressed within 10 businessed size. Settle vector configuration. 252.00 return to fee may be incurred for failures to be addressed within 10 businesses days after confirmation. 252.00 return to fee may be incurred for failures to be addressed within 10 businesses days after confirmation. 252.00 return to fee may be incurred for failures to be addressed within 10 businesses days. Failures confirmation number cives a transition number cives a transition of the property in a set of the confidence of the confirmation n	NAME:	APPLICATION #: 40798
■ 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.  {	County Health  IF THE INFORMATION PERMIT OR AUTHORIZ depending upon document 910-893-752  IF Environmental I  All property lines must be Place "orange out buildings, Place orange If property is evaluation to All lots to be for failure to After prepartr 800 (after se confirmation Use Click2Go Follow above Prepare for i possible) and After uncove if multiple po	Department Application for Improvement Permit and/or Authorization to Construct IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT ACTION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration into submitmed. (Complete site plan = 60 months; Complete plat = without expiration)  CONFIRMATION #  CONFIRM
SEPTIC  If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.  [] Accepted	given at end	of recording for proof of request.
[_] Accepted [_] Innovative [_] Conventional [_] Any [_] Alternative [_] Other	SEPTIC	
[] Alternative		마트 이 문에 맞는 그리고 없는 이 개념을 위하는 것은 한 문이 있다면 그 옷을 하는데 한 다른데 이 마습니다. 그렇게 되었다면 가는데 되었다면 하는데 하는데 하는데 하는데 하는데 나를 하는데 그를 하는데
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 or will the building contain any drains? Please explain	The applicant shall noti	fy the local health department upon submittal of this application if any of the following apply to the property in
[_]YES (] NO Does or will the building contain any drains? Please explain	(_)YES (_) NO	Does the site contain any Jurisdictional Wetlands?
[_]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 therein is True, Complete And Correct. Authorized County And State Officials Are Granted Right Officials To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. Understand That I Am Solety Responsible For The Propert Identification And Labeling Of All Property Lines And Corners And Making The Side Accessible So That A Complete Site Evaluation Can Be Performed.		그 경우 위에 가장 이 없었다면서 바다 이 회사들은 사람들이 모든 그 가지 않는데 되었다면서 하는데 보다 되었다.
(		그 아이트 아이는 게 어려웠다. 아니다 나는 아이를 내려가 되었다면 하는 것이 없는데 하는데 그 그 그 그 그는 그는 그는 그를 다 하는데
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## Harnett County GIS



## PO Box 65 Lillington, NC 27546 Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## Application for Manufactured Home Set-Up Permit (Please fill out each part completely)

Name: SAM		Address		Dhanas ( )	
City:	State:	Zlp:	Daytime		4.0
		address, & phone m	ust match informat	ion on license)	**
	ontractor Company N 19-422-8623	Address: 109		•	
City:	30000	State: NC	Zh:		
Setup Sla	nature: (SVII)	Julio IXI		State Lic#	2859
B. Electrical	Contractor Company	Name: Rox 3	DEAN E	LedRical	16.1
	524282	Address: 903	9 Kenne	berroad	
City: IA	Illow Spling	State: NC	Zip: _2	7592	
- AULTON TOTAL VALUE AND V		Destr	The state of the s	ate Lic#_5748	3-1
C. Mechanik	al Contractor Compa 27-8242	1100	Hally 1	Berry Lane	
City: _A		Address:	an Czp: 6	FIFOI	
HVAC Sid	0 // .	M. House		ate Lic#	
	Contractor Company		ike Smith	Phinting	
Phone: _	639-3117	Address: 10	9 Ablit	rd W	
City:	Angier	State:	7-Zp	27501	AUT
Plumber's	Stonature: // L	that hs	meson	State Lic#	184
Part III — Mandiai	tular monte informat	: Son			
Model Year: F	Size: X	Complete	& follow zonin	n oritorio sheet	
				The second second	
Park Name:			ot Number:		
I hereby certify that information and sion	I have the authority to a stures, and that the sec	struction or installat	tion will conform t	o the applicable man	Publication of the Publication o
set up requirements	and the lamen Country power	by Zening Ordinario	e. understand	hat if any item is in	SC /
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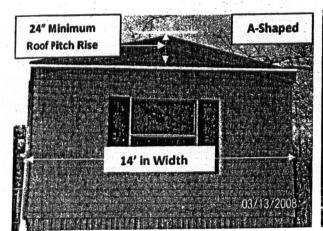
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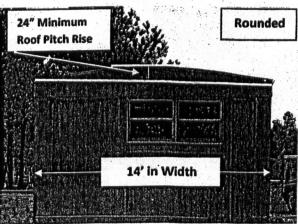
## PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

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

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.)

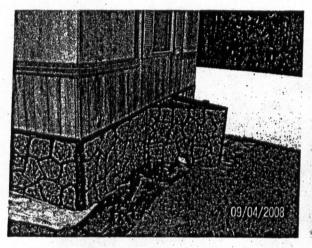




Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch
Requirement As Illustrated. The Measurement From The Peak Of
The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of
Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)

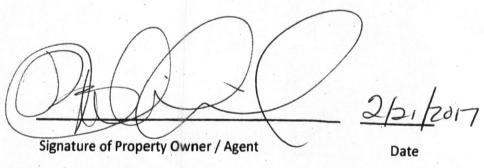
Continued.....

- 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 1st 1976.



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