Initial Application Date:

Application #	18-50043100
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CH	#					

Central Permitting

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

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION _ Mailing Address:つみろ8 Zin 27503 Contact No: 919 - 3412-3503 APPLICANT*: Mailing Address: City: *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Kenneth Kugene buker PROPERTY LOCATION: Subdivision: State Road Name: MOd SHOVIM SON ____ Map Book & Page: PC-D / Il 0 050635 0206 01 PIN 06.35-36-7252.000 Deed Book & Page: 0894 / 0945 Power Company*: *New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: Monolithic _) # Bedrooms:___ # Baths:___ Basement(w/wo bath):____ Garage:____ Deck:____ Crawl Space:___ Slab:_ SFD: (Size (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms) _) # 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 X DW TW (Size $\frac{\partial \mathcal{S}}{\partial x} \times \frac{\partial \mathcal{S}}{\partial x}$) # Bedrooms: 3 Garage: (site built?) Deck: (site built?) No. Bedrooms Per Unit: x____) No. Buildings:___ Home Occupation: # Rooms:__ Use: Addition/Accessory/Other: (Size x) Use:_ Closets in addition? (___) yes (___) no County ____ Existing Well 🛂 New Well (# of dwellings using well ______) *Must have operable water before final _ 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 (X_) no Does the property contain any easements whether underground or overhead $(\underline{\hspace{0.2cm}})$ yes $(\underline{\hspace{0.2cm}})$ no Other (specify): Structures (existing of proposed): Single family dwellings: comments: OK'd For second awelling Der Landon Chandler Required Residential Property Line Setbacks: Front Minimum Rear Closest Side Sidestreet/corner lot Nearest Building on same lot

Residential Land Use Application

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head WEST IN E. Front St. + oward 5. 157 St.
Forn sight onto S. Main St. Turn left onto McKinney PKWy. Take Christian Light Ad and Cokesbury Ld. to BJ Lane. Turn right onto BJ Lane. Property is at the end
Ad and Cokesbury Ad to BJ Lane. Turn right onto BI have Property is at the end
of the road.
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.
hereby 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's Agent Date
Date 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 explres 6 months from the initial date if permits have not been issued**

NAME: Kenneth Eugene Boxer

M

APPLICATION #: 18-50043100

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 800

- 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 <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.
- 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 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
- 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. <u>Please note confirmation number</u>
 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.

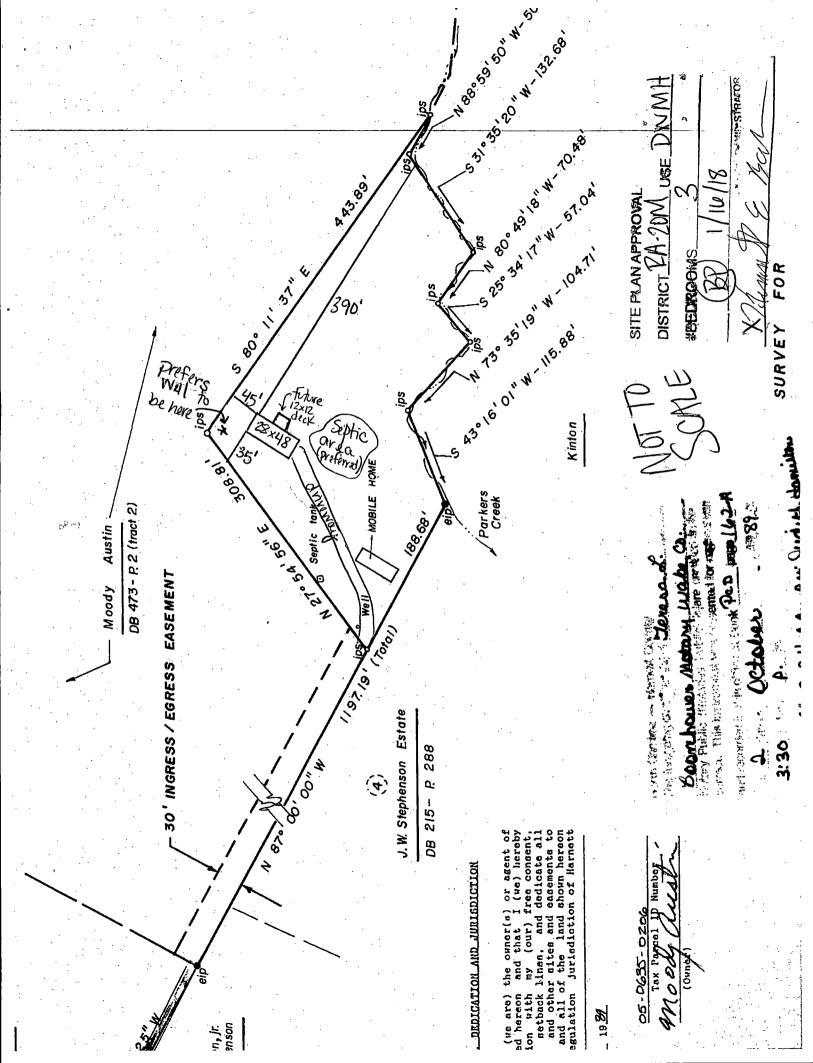
<u>SEPTIC</u>					
If applying for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
{}} Accepted	{} Innovative {} Conventional {} Any				
{}} Alternative	{}} Other				
	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:				
{_}}YES {X_} NO	Does the site contain any Jurisdictional Wetlands?				
{_}}YES X_}NO	Do you plan to have an irrigation system now or in the future?				
{_}}YES	Does or will the building contain any drains? Please explain.				
{X_}YES {}NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{_}}YES {X} NO	Is any wastewater going to be generated on the site other than domestic sewage?				
{_}}YES { X _}NO	Is the site subject to approval by any other Public Agency?				
{_}}YES { X } NO	Are there any Easements or Right of Ways on this property?				
{X}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 Applicat	tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And				
State Officials Are Grante	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.				
I Understand That I Am S	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making				
My matt	at A Complete Site Evaluation Can Be Performed. 1/16/18				
PUMPEDTYTWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE				

Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is *falsified*, changed, or the site is altered, then the Well Construction Permit shall become *invalid*.

APPLICANT INFORMATION					
Kenneth Eugene Boker	(9/9) <u>348-35</u> 03				
Applicant/Owner 385 BJ Lane, Holly Springs, NC 27502	Phone Number				
Street Address, City, State, Zip Code	and the second s				
The Applicant must submit a Site Plan. The Site Plan is a map/drawing 1. existing and/or proposed property lines and easements with dimensions; 2. the location of the facility and appurtenance; 3. the location for the proposed well; 4. the location of existing or proposed sewer lines and/or sewage disposal 5. the location of any existing wells within 100 feet of the property; surface 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 100 feet of the property.	systems within 100 feet or the proposed well; se water bodies;				
The Applicant shall notify the Harnett County Health Director throu Division of Environmental Health if any of the following occur prior to 1. there is a relocation of the proposed facility; 2. there is a change in the intended use of the facility; 3. there is a need for installing the waste water system in an area other than 4. there are landscape changed that affect site drainage. Contact information: Environmental Health Division	o well construction: n indicated on the well permit; or				
PROPERTY INFORMATION					
Single-Family Multifamily Church □ Restaura	l ant □ Business □ Irrigation □				
Street Address BJ Lane Subdiversel # 050635 6206 6) PIN	vision/Lot # #_0635-36-7252-008				
Directions to the Site Held West on E. Front St. toward S. 15t St. Turn right and S. Main St. Turn left and McKinney flowy, Take Christian Light Rd. and Cakestury Rd. to B. Thank Turn right and B. Thank. Progrety 1.5 at the end of the rand. I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.					
I understand that I am solely responsible for the proper identification and labeling making the site accessible so that a will can be properly constructed according to t	of all property lines, underground utility lines, and				
Limmed Lynn Bill	1/16/18				
Property Owner's of Owner's Legal Representative Signature Required	Date				

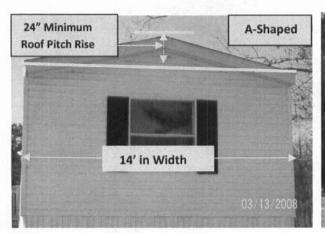


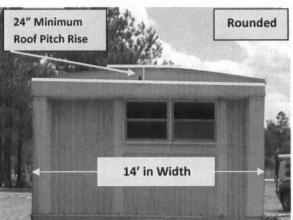
PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA-20M Certification Criteria

I, Kerneth Eugene Baker , 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.....

- 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.

Signature of Property Owner / Agent

Binn Eyn Bur

Date

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