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: Cluckey Sule State - Indexes Mailing Address: 136 Quail Acres base City: Broadway State: NC Zip: 2752 Contact No: 919-935: 6099 Email: APPLICANT*: Branson Mann Mailing Address: 1418 Carthage St. Apt. 6 City: Safad State: NC Zip: 27332 Contact No: 919-8873412 Email: **Please fill out applicant information if different than landowner 910 - 872-3049 CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: State Road Name: 100 US 10
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION LANDOWNER: Cludrey on State: Mc Zip: 275 Contact No: 919.935. 6099 Email: APPLICANT*: Branson Mann Mailing Address: 1418 Carthage St. Apt. 6 City: Surface State: Mc Zip: 27330 Contact No: 919.80734/2 Email: *Please fill out applicant information if different than landowner 910.872.3049 CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: Albert State Road Name: Out of the Book & Page: 1. In April 1. State Road Mame: Plin: 910.872.3049 Parcel: 13.9080.0106.01 PIN: 91090 Power Company*: 1. Mall 135. *New structures with Progress Energy as service provider need to supply premise number from Progress Energy. PROPOSED USE: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Sl
LANDOWNER: Cludrey one State: NC zip: 2753 Contact No: 919.935.6099 Email: APPLICANT*: Branson Man Mailing Address: 1418 Carthage St. Apt. 6 City: Sarfad State: NC zip: 27330 Contact No: 919.86784/2 Email: *Please fill out applicant information if different than landowner 910.877.3049 CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: State Road Name: 1 COUNTY LOCATION: Subdivision: Pln: QCOO. 9 Power Company*: 100 Power Company*: 100 Progress Energy. PROPOSED USE: Store Sold: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: Slab:
City: Branson Mann Mailing Address: 1418 Carthage St. Apt. 6 City: Safad State: 142 Zip: 27330 Contact No: 919 80784/2 Email: *Please fill out applicant information if different than landowner 910 . 872 3049 CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: Phone # State Road # 12 16 State Road Name: 10 0000 Under Book & Page: 11 14 135 Parcel: 13 . 9060 . 0 106 . 0 1 PIN: 9100 Power Company*: 1000 Progress Energy. *New structures with Progress Energy as service provider need to supply premise number from Progress Energy. PROPOSED USE: State: 1/4 Zip: 27530 Contact No: 919 80784/2 Email: 1000 Power Company*: 1000 Power Company*: 1000 Power Company*: 1000 Power Company*: 1000 Progress Energy. Monolithic State: 1000 Progress Energy as Service Provider need to Supply Premise number Progress Energy. Monolithic State: 1000 Power Company*: 1000 Power Company*: 1000 Progress Energy.
APPLICANT*: Branson Mann Mailing Address: 1418 Carthage St. Apt. 6 City: Surfaced State: 162 Zip: 27330 Contact No: 919 80784/12 Email: 910 . 872 .3049 CONTACT NAME APPLYING IN OFFICE: Phone # PROPERTY LOCATION: Subdivision: 101
State:
State:
CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: State Road # 2
PROPERTY LOCATION: Subdivision: State Road # 12
State Road # 2
Zoning:
*New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE: Monolithic SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab:
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
,
Mod: (Size x) # Redrooms # Baths Resement (w/ws heth) Correct City D. (# D. (
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: VSW DW TW (Size Wx V) # Bedrooms: Garage: (site built?) Deck: (site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees:
Addition/Accessory/Other: (Size x) Use:
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? () 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 100+
Rear 25 50"
Closest Side 15'
Sidestreet/corner lot 20
Nearest Building 1007
Residential Land Use Application Page 1 of 2

14 miles begaling to me to See Colors 14 miles begaling to the form us 421 about	
filles reading lowers Janton Illen loss anto la C	-4
to the end, then right onto Box Quail Aires fane, go to them the end, proper	8/
The last are on the right. There will be a house already on the first of the	ty
property - the new hours will be an in the first of the	
land is currently being cleared.	
The contesting secretary.	
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 submereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to severalize the severalized that severalized the several several the several seve	
nereby state that foregoing statements are accurate and correct to the best of my knowledge. Buy and the specifications of plans subm	
Permit subject to revocation if false information is provided	nitted.
5 7-5-18	nitted.
Signature of Owner or Owner's Agent Signature of Owner or Owner's Agent Signature of Owner or Owner's Agent Date	nitted.

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

If at all possible please call beforehand,
There are dogs on property!

Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

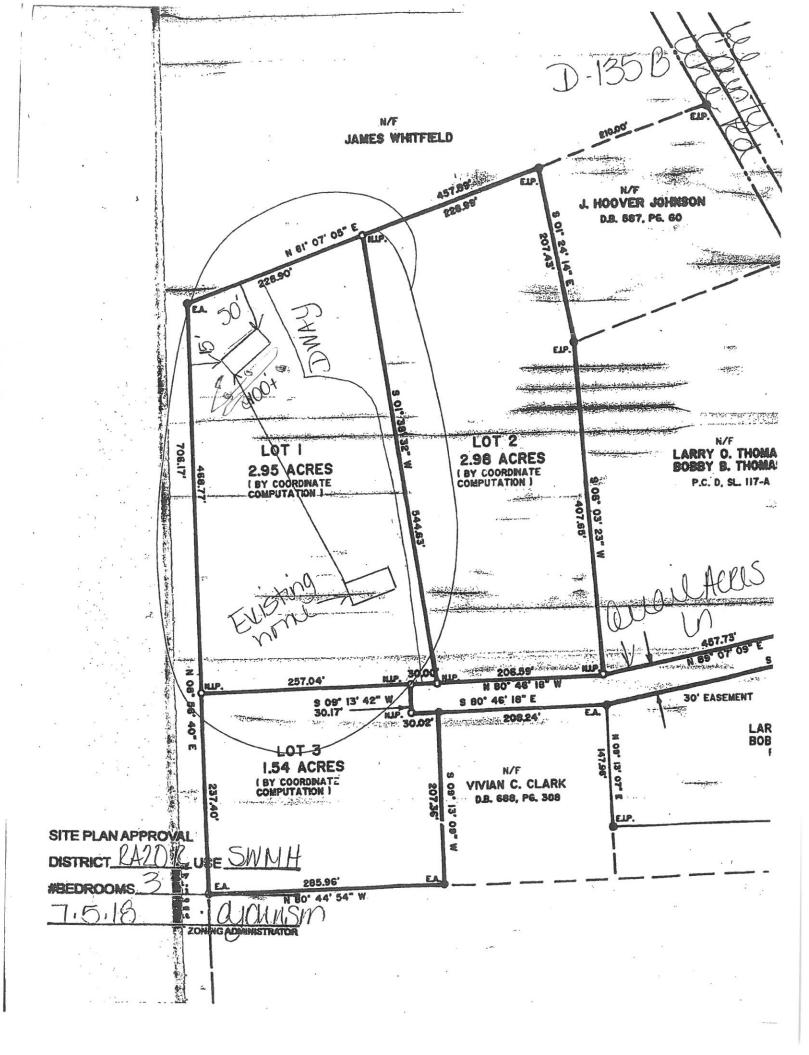
Sheet:
Property ID:
Lot #:
File #:
Code:

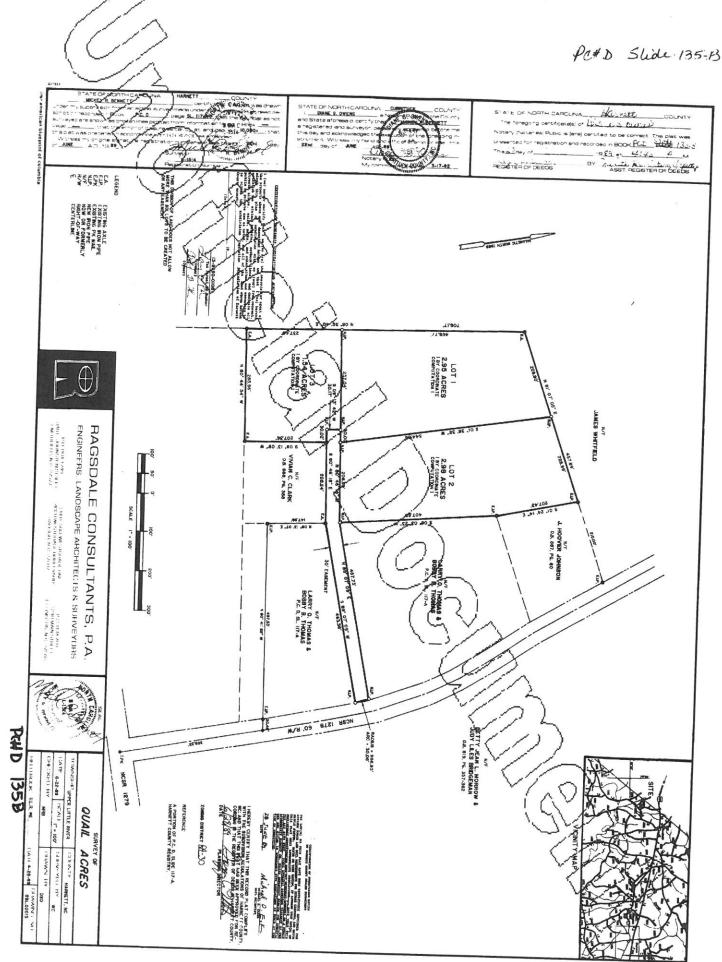
SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Owner: Applicant: Address: Proposed Facility: UBDQM Location of Site: Water Supply: Publi Evaluation Method: Auger Boring Type of Wastewater: Sewa		Property Size:	☐ Other
P	age Industrial Process	☐ Mixed	

F I L E	.1940 Landscape		SOIL MORPHOLOGY .1941		.1942	OTHER PROFILE FACTORS			
#	Position/ Slope %	Depth (In.)	Structure/ Texture	.1941 Consistence Mineralogy	Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR
ì	7-10	0-27	war ezt	m m/g				Honz	B 6
		078	GS	ins Juo					
		28-40	SBK SCL	VFD W/WP FD 50/59	10727/2038				PTY
					13		277		
		0-38	G 51	VFL NS WP	CR20 40'			į.	
+		38	53× 562	F2 55/5P	CR20 40'				P5
		2-78	C	100					
		8.36	58K SC/	VF, U5/NP Fr. 35/2P	y *				0<
			3312 302	\$5/29					·P5

Description	Initial System	Repair System	Other Factors (.1946):	
Available Space (.1945)	Jacon	1	Site Classification (.1948):	
System Type(s) Site LTAR	25%	16	Evaluated By: Others Present:	





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 Environmental Health New Septic System Code 800 All property irons must be made visible. Place "pink property flags" on each corner iron of lot 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 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. 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. [__] Innovative {__} Conventional

If applying for authorization to construct please indicate desired system type(s): can be rapked in order of preference, must choose one. {__} Accepted {__}} 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: Does the site contain any Jurisdictional Wetlands? YES Do you plan to have an irrigation system now or in the future? Does or will the building contain any drains? Please explain. Are there any existing wells, springs, waterlines or Wastewater Systems on this property? Is any wastewater going to be generated on the site other than domestic sewage? Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property? YES 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10/10