

Initial Application Date: 7.6.18

Application # 1850044437

CU# _____

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: Kenneth L. Brown Mailing Address: P.O. Box 501
City: Fuquay Varina State: NC Zip: 27526 Contact No: 919 3378460 Email: kbrown0023@gmail.com

APPLICANT*: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Olena Davis Lot #: 4 Lot Size: 769
State Road # 1437 State Road Name: Ballard Rd Map Book & Page: 2000152
Parcel: 08-0052-0027-04 PIN: 0452-53-6295
Zoning: R20M Flood Zone: X Watershed: IV Deed Book & Page: 35840017 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 10 x 80) # Bedrooms: 3 Garage: _____ (site built? _____) Deck: (site built? _____)
back 2 10x12 back
10x12 front

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 Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>61</u>
Rear	<u>25</u>	<u>120</u>
Closest Side	<u>10</u>	<u>15</u>
Sidestreet/corner lot	<u>20</u>	<u>—</u>
Nearest Building on same lot	<u>10</u>	<u>—</u>

Comments: Propose
1 removed

*SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head west on E front Street toward S 1st Street. West on E front Street toward S 1st St. Right on S main Street, left on McKinney Pkwy. Left on US 401N. Right on Ballard Rd. Right onto Olena Dr. 39 Olena Drive

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.

* Kenneth Brown
Signature of Owner or Owner's Agent

7/6/2018
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

Harnett GIS

NOT FOR LEGAL USE



NOT TO SCALE

SITE PLAN APPROVAL
 DISTRICT RA20M USE DWNIH
 #BEDROOMS 3
T.C.18 dickinson
 ZONING ADMINISTRATOR

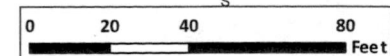
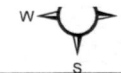
Kenneth Brown
 7/6/2018



GIS/E-911 Addressing

July 6, 2018

- | | | |
|-------------------------------|-------------------|--------------|
| Recycle Center | City Limits | NC |
| Landfills | Address Numbers | US |
| Surrounding County Boundaries | Airport | Roads |
| Federal Property | MajorRoads | Mile_Markers |
| | Interstate | Railroad |

















1 inch = 47 feet

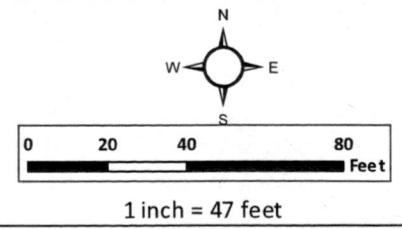
Harnett GIS

NOT FOR LEGAL USE



 **Harnett COUNTY**
NORTH CAROLINA
GIS/E-911 Addressing
July 6, 2018

- | | | | |
|---|---|--|---|
|  Recycle Center |  City Limits |  NC |  Parcels |
|  Landfills |  Address Numbers |  US | |
|  Surrounding County Boundaries |  Airport |  Roads | |
|  Federal Property | MajorRoads |  Mile_Markers | |
| |  Interstate |  Railroad | |



NAME: Kenneth Brown

APPLICATION #: 1850044437

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 **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.

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.

Kenneth Brown
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7/6/2018
DATE

Date: 7.6.18

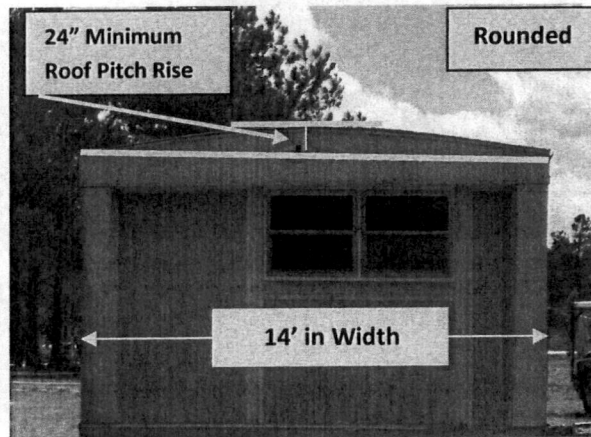
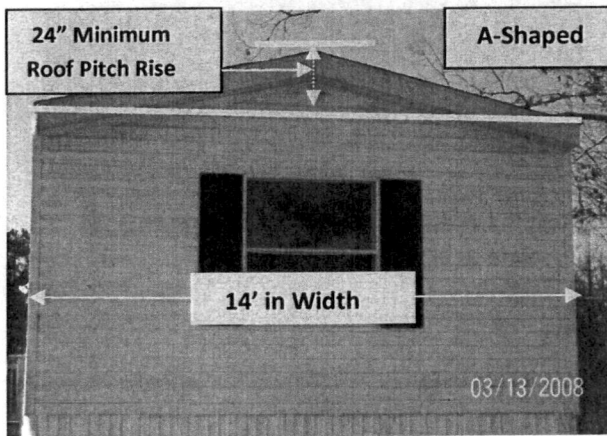
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PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, _____, 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.

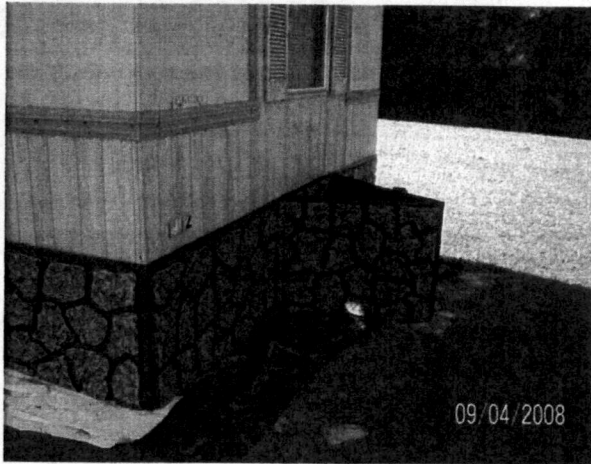
1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty 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.....

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 1st 1976.

Kenneth Brown

Signature of Property Owner / Agent

7/6/2018

Date

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



Manage your account online:
www.chase.com

Customer Service:
1-800-524-3880

Mobile: Download the
Chase Mobile® app today

ACCOUNT ACTIVITY (CONTINUED)

Date of Transaction	Merchant Name or Transaction Description	\$ Amount
04/23	JIFFY LUBE #3837 HOLLY SPRINGS NC	103.27
04/23	YMCA/SGULL/SFARER/KANATA WWW.YMCATRIAN NC	80.23
04/26	GEICO *AUTO MACON DC	164.39
04/28	SPEEDWAY 08232 24 ANGIER NC	13.39
04/28	SUNBELT RENTALS #036 RALEIGH NC	490.00
04/28	SPEEDWAY 08232 24 ANGIER NC	19.50
04/27	CHALYBEATE STORE FUQUAY VARINA NC	62.18
04/28	OREILLY AUTO #2134 ANGIER NC	71.28
04/28	TRADER JOE'S #741 QPS CARY NC	103.30
04/28	HOLLAND RENT ALL RALEIGH NC	58.99
04/29	KROGER FUEL #3371 FUQUAY VARNIA NC	62.52
04/30	KROGER FUEL #3371 FUQUAY VARNIA NC	62.59
04/30	SPEEDWAY 06961 454 GARNER NC	13.62
05/01	OFC*O2 Fitness 919-5320702 NC	44.00
05/01	HARRIS TEETER #0058 APEX NC	11.83
04/30	T R ASHWORTH FUQUAY VARINA NC	65.38
05/01	TIGER ROCK MARTIAL ARTS HOLLY SPRINGS NC	172.50
05/02	PICCOLA ITALIA PIZZA RALEIGH NC	40.70
05/03	FOREVER CLEAN PORTABLE 919-5520200 NC	535.18
05/05	AUTOZONE #3921 ANGIER NC	3.20
05/03	FIDELITY LIFE ASSOC. 800-369-3990 IL	26.32
05/05	CHALYBEATE STORE FUQUAY VARINA NC	15.07
05/05	SPEEDWAY 08232 24 ANGIER NC	8.39
05/05	SPEEDWAY 08232 24 ANGIER NC	49.51
05/05	KROGER FUEL #3371 FUQUAY VARNIA NC	45.93
05/05	H & S AUTO PARTS OF FUQUA FUQUAY VARINA NC	26.79
05/04	PRO'S EPICUREAN CARY NC	63.63
05/08	KROGER FUEL #3371 FUQUAY VARNIA NC	27.85
05/08	DMV VEHICLE REG RENEWAL 919-715-7000 NC	123.46
05/08	DMV VEHICLE REG RENEWAL 919-715-7000 NC	45.69

2018 Totals Year-to-Date	
Total fees charged in 2018	\$0.00
Total interest charged in 2018	\$0.00

Year-to-date totals do not reflect any fee or interest refunds you may have received.

INTEREST CHARGES

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

Balance Type	Annual Percentage Rate (APR)	Balance Subject To Interest Rate	Interest Charges
PURCHASES			
Purchases	16.49% (v)(d)	-0-	-0-
CASH ADVANCES			
Cash Advances	26.49% (v)(d)	-0-	-0-
BALANCE TRANSFERS			
Balance Transfer	16.49% (v)(d)	-0-	-0-

(v) = Variable Rate
(d) = Daily Balance Method (including new transactions)
(a) = Average Daily Balance Method (including new transactions)

30 Days in Billing Period

Please see Information About Your Account section for the Calculation of Balance Subject to Interest Rate, Annual Renewal Notice, How to Avoid Interest on Purchases, and other important information, as applicable.

IMPORTANT NEWS

Earn 5% cash back on up to \$1,500 in combined purchases in bonus categories between April 1 and June 30, 2018. Learn more and activate at chase.com/freedom or call 1-800-524-3880 by June 14, 2018.

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: DJOHNSON Type: CP Drawer: 1
Date: 7/06/18 54 Receipt no: 9284

Year	Number	Amount
2018	50044437	
39 OLENA DR		
FUQUAY-VARINA, NC 27526		
B4	BP - ENV HEALTH FEES	
		\$100.00

ETANK

KENNETH L BROWN

Tender detail	
CP CREDIT CARD	\$100.00
Total tendered	\$100.00
Total payment	\$100.00

Trans date: 7/06/18 Time: 16:55:13

** THANK YOU FOR YOUR PAYMENT **

HARRETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Date: 7/26/18 24 Receipt no: 9884
Opers: DUNNISON Type: CP Drawer: 1

Year: 2018 Number: 2004437
Amount

35 OLENA DR
FURNAY-VARINA, MO 67258
BA 8P - ENV HEALTH FEES
\$100.00

STANK

KENNETH C BROWN

Total payments \$100.00
Total tendered \$100.00
CP CREDIT CARD \$100.00
Tender detail

Trans date: 7/26/18 Trans: 1875213

** THANK YOU FOR YOUR PAYMENT **