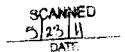
nitial Application Date:	5/2	3/11	
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Application #	11-500-26720
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CU#_

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"
LANDOWNER: ROSA LASATER Mailing Address: 714 MAMIE Unchurch Rd.
City: Lillington State: NC Zip: 275 1/2 Mailing Address: 714 MAMIC Upchurch Rd.
APPLICANT: Rebart LAS-ATER Mailing Address: 714 mgmie Upchvich Rd. City: Lill; ng Lon State: NC Zip: 2754 contact No: 910 814 7080 Email: 1/1951 Teng of Con
*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Rost LasaTer Phone #
PROPERTY LOCATION: Subdivision: MALELLE STEPHENSON Lot #: 2 Lot Size: 49.29
State Road # 1514 State Road Name: Manie Vechurch Rd. Map Book & Page: 2008 / 868
Parcel: 11066 0081 PIN: 0671-07-4186, 000
Zoning: 18430 Flood Zone: X Watershed: IV Deed Book & Page: 2560 / 593 Power Company*: PAGGIZESS
*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:
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame _
Manufactured Home:SW_X_DWTW (Size 28 x 45) # Bedrooms: 2 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: (Sizex) Use: Closets in addition? () yes () n
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 (X) no
Structures (existing or proposed): Single family dwellings: LEXT Manufactured Homes: 1000560 Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum_35 Actual_800 [†] /-
Rear 25 (100*/-
Closest Side 10 200
Sidestreet/corner lot_20
Nearest Building 6 600 ^{†/-} on same lot

specific directions to	cheriff Zat	noon Rd.	JAKE HWZ Jo Zni Upchurch	les tak	Left on	10/KE
WIJA DV	right 2	story hou	ist on ris	ht		90-77-
If permits are granted I agi	se to conform to all (ordinances and laws o	of the State of North Caro	lina regulating such	work and the specific	ations of plans submitted.
hereby state that foregon	o statements are	turate end correct to the whole or Owner's Ag	he best of my knowledge	Permit subject to 5/23	revocation if false infor	mation is provided.

^{***}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**

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

\wedge	RA-30 Criteria Certification
	, landowner/agent of Parcel Identification Number
Kon Kan	, landowner/agent of Parcel Identification Number
110661 2081	. located in an RA-30 Zoning District, do hereby certify the following

The multi-section manufactured home shall meet the following appearance standards, verified by zoning inspection approval, prior to the issuance of a Certificate of Occupancy:

- 1. The structure must be a multi-section unit built to the HUD code for manufactured homes.
- 2. When located on the site, the longest axis of the unit must be parallel to the lot frontage.
- 3. The structure must have a pitched roof that is covered with material commonly used in standard residential roofing construction. Said material must be installed properly and be consistent in appearance.
- 4. The structure must have masonry underpinning that is continuous, permanent and unpierced except for ventilation and access.
- 5. The exterior siding must consist predominantly of vinyl, aluminum, wood, or hardboard; and must be comparable in composition, appearance, and durability to the exterior siding commonly used in standard residential construction. Said exterior siding shall be in good condition, complete, and not damaged or loose.
- 6. The minimum lot size must be one (1) acre excluding any street right-of-way and the minimum lot frontage must be 150 feet as measured at the right-of-way line or along an easement whichever applies.
- 7. The tongue or towing device must be removed.
- 8. The home must have been constructed after July 1st 1976.

By signing this form, I acknowledge that I understand and agree to comply with each of the seven (7) appearance criteria listed above for the multi-section manufactured home I propose to place on the above referenced property. I further acknowledge that a Certificate of Occupancy (CO) entitling me to apply for electric service will not be issued until each appearance criteria has been met and approved.

Signature of Landowher/Agent

Date

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

APPLICATION #: 11-500-26720

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) CONFIRMATION# 116635 910-893-7525 option 1 Environmental Health New Septic System Code 8 00 All property irons must be made visible, Place "pink p roperty 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 En vironmental 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 Cod
 - Follow above instructions for placing flags and card on property.
 - Prepare for inspection by removing soil over over outlet end as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
 - After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then u se code 800 for Environmental Health ins pection. 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 authorizatio	n to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Accepted	{}} Innovative {\vec{\vec{\vec{\vec{\vec{\vec{\vec
{}} 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 {\(\(\lambda \)} NO	Does the site contain any Jurisdictional Wetlands?
{_}}YES { _X }NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}}YES {_ X }NO	Does or will the building contain any drains? Please explain.
{ <u>X</u> }YES {}} NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{_}}YES {_ ½ } 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?
{}}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	on 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 So	lely 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.
1) Il foi-	5 23 20,
PROPERTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE

1 of 3 12/10 E-Health Checklist

NOT TO SEALE: 49,29'