Initial Application Date: 5-9-12 Application # 12 5-00 288 87
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"
City: BOSPO/WAY State: MCZip: 2755 Contact No: 9/9-99-9902 Email:
City: State: _/
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:Lot Size: 12,07
17 9/91 0000 / // 0/21/10/0/20
01.20
Zoning: <u>LA 30</u> Flood Zone: Watershed: <u>MA</u> Deed Book & Page: <u>Lo SC 1 29</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: 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
The state of the s
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 () no
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 2 Actual 600 T
Rear
Closest Side
Althorities III
Sidestreet/corner lot
Nearest Building on same lot

orl Bragg_Carrip_McCa S Harnett strong roots + new growth TO LICE WING HIGHONAL County Boundary LIGHT INDUSTRIAL CONSERVATION Green: Dand 2 Green: Dand 2 Dive: Dand 3 AddressPomb Chan Bend ? COMMUSCIAL Bles Band Mayor Roads INDUS HAIAL LILLINGTON mett sid BENSON ANGIER DUNN 144.20M - I CA-2016 Zoning COATS Di <>-* ar cels 3 5 Roads Rivers ELS Ady use of this map shall be at the solic risk of the user of this map Athough, all effort has been taken to instruct accuracy in the data presented. Harnett County makes no warranty, expressed or implied, as to the accuracy of this information represented herein. Any user of this product shall hold manness that the accuracy of this information represented herein. Any user of this product shall hold manness. Harnett County, its elected officials, employees and agents from and against any claim, damage, loss, action, cause of action, or labulity arising from the use of first GIS product. New We pring Administrator 75 +009 LSI SI SITE PLAN APPROVAL OH 791 #BEDROOMS --905 र्भः 704 ACH RD 669 HARNETT COUNTY, NORTH CAROLINA www.harnett.org Harnett County GIS 305 W Cornelius Harnett Blvd, Suite 100 Lillington NC 27546 Phone: 910-893-7523 www.harnett.or 159 620 155 GIS/LAND RECORDS 156 613 1 145 CHAUCER LN 28 1100 # GEOFFREY CIR 125 8 575 105 90 -4



PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

RA-30 Criteria Certification

1. KEITH BUGANT	M, landowner/agent of Parcel Identification Number
, 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 Landowner/Agent

Date

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

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)	1/						
	NAME:	beit	h Buchar	m	APPLICATION #:			
			*This application to b	e filled out when applying	g for a septic system inspection.	*		
	This application to be filled out when applying for a septic system inspection. <u>County Health Department Application for Improvement Permit and/or Authorization to Construct</u>							
	IF THE IN	FORMATION	IN THIS APPLICATION IS	S FALSIFIED, CHANGED, C	OR THE SITE IS ALTERED, THEN D. The permit is valid for either 60 m	THE IMPROVEMENT		
1	depending	upon documen	tation submitted. (Complete	site plan = 60 months; Comp	olete plat = without expiration)	1 7 / 0 /		
	/ 9	10-893-752	5 option 1		CONFIRMATION #	13506		
/			Health New Septic Sys		operty flags" on each corner i	iron of lot All property		
/	All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All proper lines must be clearly flagged approximately every 50 feet between corners.							
	• P	lace "orang	e house corner flags," a	t each corner of the prop	posed structure. Also flag driv developed at/for Central Perm	eways, garages, decks,		
					asily viewed from road to assis			
	• If	property is	thickly wooded, Environ	nmental Health requires	that you clean out the underg	growth to allow the soil		
					ilk freely around site. Do not g			
	 All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurre for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready. 							
	• Ā	fter preparir	ng proposed site call the	voice permitting system	n at 910-893-7525 option 1 to	schedule and use code		
		00 (aπer se onfirmation	lecting notification perm	recording for proof of re	st) for Environmental Health in quest.	ispection. Please note		
	• U	se Click2Go	ov or IVR to verify result	s. Once approved, proc	eed to Central Permitting for p	ermits.		
			lealth Existing Tank Ir					
	• F	ollow above repare for i	instructions for placing	flags and card on prope soil over outlet end of	rty. tank as diagram indicates, a	nd lift lid straight up (if		
	p	ossible) and	then put lid back in pl	ace. (Unless inspection	is for a septic tank in a mobile	home park)		
			/E LIDS OFF OF SEPTIC		at 910-893-7525 option 1 & se	elect notification normit		
	if	multiple pe	rmits, then use code {	300 for Environmental F	Health inspection. Please note	confirmation number		
			of recording for proof of		and An Orandard Draws (Miles of Feedings			
	SEPTIC	se Click2Go	ov or IVH to near results	. Once approved, procee	ed to Central Permitting for ren	naining permits.		
	If applying	for authoriza	tion to construct please indi	icate desired system type(s):	can be ranked in order of preferen	ce, must choose one.		
1	{}} Acc	epted	{}} Innovative	{}} Conventional	{}} Any			
	{}} Alte	rnative	{}} Other		· .			
					application if any of the following	g apply to the property in		
•	question. I	f the answer	is "yes", applicant MUST	ATTACH SUPPORTING	G DOCUMENTATION:			
	{_}}YES	$\{ \angle \}$ NO	Does the site contain an	ny Jurisdictional Wetlands	?			
	{}}YES	{✓ NO	Do you plan to have an	irrigation system now or i	n the future?			
	{}}YES	 NO N	Does or will the buildir	ng contain any <u>drains</u> ? Plea	se explain			
1	{}}YES	{∠}} NO	Are there any existing	wells, springs, waterlines o	r Wastewater Systems on this pro	perty?		
+	{_}}YES	{✓} NO	Is any wastewater going	g to be generated on the sit	e other than domestic sewage?	,·		
+	}YES	∕ NO	Is the site subject to app	proval by any other Public	Agency?			
1	(∠)YES	{}} NO	Are there any Easemen	ts or Right of Ways on this	property?			
ł	}YES	{✓} NO	Does the site contain an	y existing water, cable, ph	one or underground electric lines	?		
			If yes please call No C	uts at 800-632-4949 to loca	ate the lines. This is a free service	3 .		
I	Have Read	This Applica	· · · · · · · · · · · · · · · ·		in Is True, Complete And Correct.			
					o Determine Compliance With App			
				•	abeling Of All Property Lines And			
				ion Can Be Performed.	_	- -/		

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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