Initial Application Date: 11-20-12 Application # 1250030132					
CU#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: Starley Cottom Mailing Address: 237 Country Laker Lamo					
City: Helly Springs State: NC zip: 27540 Contact No: 919-333-5919 Email:					
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: State Road # State Road Name:					
Zoning: 1/4 5/2 Flood Zone: Watershed: 1/4 Deed Book & Page: 1/2 C 1 3/1 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: (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:SW_XDWTW (Size 28 x 80) # Bedrooms 3 Garage:(site built?) Deck:(site built?)					
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: Our easy by 3					
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:					
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no					
Water Supply: County Existing WellX_ New Well (# of dwellings using well) *Must have operable water before final					
Sewage Supply:X 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? (X_) yes () no					
Does the property contain any easements whether underground or overhead (X) yes (_) no					
Structures (existing or proposed): Single family dwellings: Manufactured Homes: VES Other (specify):					
Structures (existing or proposed): Single family dwellings: Manufactured Homes: YES Other (specify): Required Residential Property Line Setbacks: Comments: 1 Fy5 Fong MWW H 1 Fuyural NWW H					
Front Minimum 35 Actual 405					
Rear <u>25 30</u>					
Closest Side 10 45					
Sidestreet/corner lot					

Page 1 of 2
APPLICATION CONTINUES ON BACK

Nearest Building on same lot

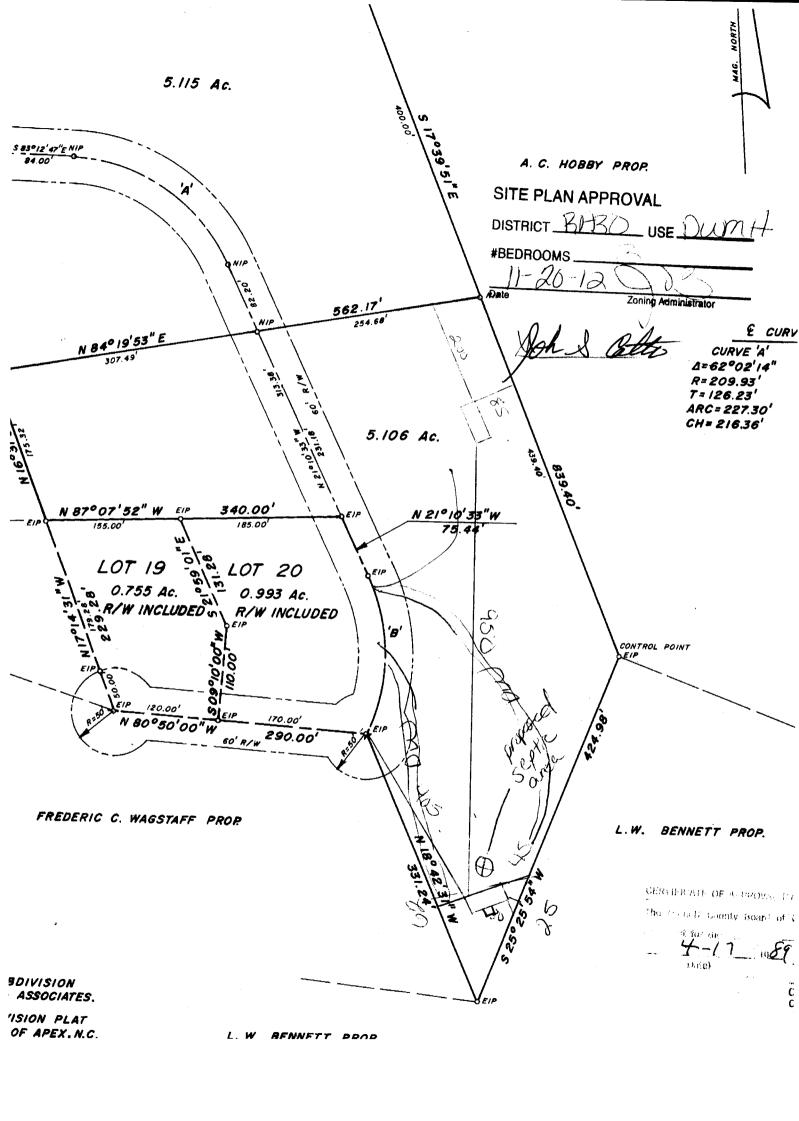
Residential Land Use Application

03/11

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
If permits are granted I agree to conform to all ordinances and laws of the State of No I hereby state that foregoing statements are accurate and correct to the best of my kn	rth Carolina regulating such work and the specifications of plans submitted owledge. Permit subject to revocation if false information is provided.
Signature of Owner's Agent	<u> </u>

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



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/1	,					
\mathcal{C}	NAME	·			APPLICATION #: 1250	<u> </u>
					for a septic system inspection.*	
	Cou	inty Health	Department Applica	tion for Improvement	Permit and/or Authorization	n to Construct
					R THE SITE IS ALTERED, THEN THE The permit is valid for either 60 month	
,	dependin	g upon documen	tation submitted. (Complete	site plan = 60 months; Comple	te plat = without expiration)	
1	\	910-893-752			CONFIRMATION #	
	En		Health New Septic Sys			at tak. All managements
	1 •			visible. Place pink prop mately every 50 feet betw	perty flags" on each corner iron	or lot. All property
					osed structure. Also flag drivewa	ıys, garages, decks.
		out buildings	, swimming pools, etc.	Place flags per site plan d	leveloped at/for Central Permittin	ng.
	•				sily viewed from road to assist in	
	•				hat you clean out the <u>undergrov</u> cfreely around site. <i>Do not grad</i>	
	•				nfirmation. \$25.00 return trip fe	
		for fallure to	uncover outlet lid, ma	ark house corners and p	roperty lines, etc. once lot cor	nfirmed ready.
					at 910-893-7525 option 1 to sch	
				it it multiple permits exist recording for proof of regu) for Environmental Health inspe	ection. Please note
					ed to Central Permitting for perm	nits.
			——————————————————————————————————————	spections Code 800		
				flags and card on propert		
	 Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up 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 					
					t 910-893-7525 option 1 & selec	t notification permit
		if multiple pe	rmits, then use code 8	00 for Environmental He	ealth inspection. Please note co	
			of recording for proof of		d to Combinal Domesius of the combination of	
	• SEPTIC		v or IVH to near results	. Once approved, proceed	d to Central Permitting for remain	ling permits.
	If applying	ng for authoriza	tion to construct please indi	cate desired system type(s): c	can be ranked in order of preference, r	nust choose one.
	{}} Ac	cepted	{}} Innovative	{⊥} Conventional	{} Any	
	{}} Al	ternative	{}} Other		<u>.</u>	
	The appli	cant shall notif			oplication if any of the following app	ply to the property in
1	question.	If the answer	is "yes", applicant MUST	ATTACH SUPPORTING	DOCUMENTATION:	pry to the property in
	{}}YES	{ <u>X</u> } NO	Does the site contain ar	y Jurisdictional Wetlands?		
	{_}}YES	{ <u>¥</u> } NO	Do you plan to have an	irrigation system now or in	the future?	
	{X}YES	{_}} NO	Does or will the building	g contain any drains? Please	explain. <u>Sewage, drai</u>	D
ĺ	YES	{ X } NO	Are there any existing v	vells, springs, waterlines or	Wastewater Systems on this propert	y ?
1	_}YES	{X}} NO	Is any wastewater going	g to be generated on the site	other than domestic sewage?	
ł	}YES	{ ∑ } NO	Is the site subject to app	proval by any other Public A	gency?	
{	XYES	{_}} NO	Are there any Easement	s or Right of Ways on this p	property?	
{	_}YES	{ <u>X</u> } NO	Does the site contain an	y existing water, cable, phor	ne or underground electric lines?	

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

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

The Site Accessible So That A Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

<u>0-7-/7</u> 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

Applicant/Owner Phone Number 237 Country Folks LN Holly Spirass n.C. Street Address, City, State, Zip Code 27540					
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show: 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 systems within 100 feet or the proposed well; 5. the location of any existing wells within 100 feet of the property; surface water bodies; 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 100 feet of the proposed well site.					
The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction: 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 indicated on the well permit; or 4. there are landscape changed that affect site drainage. Contact information: Environmental Health Division - 910-893-7547					
PROPERTY INFORMATION					
Proposed use of well Single-Family Multifamily Church Restaurant Business Irrigation					
Street Address Country Folks in Subdivision/Lot # Parcel # 050026 Dat 7 PIN # 0036-71508400					
<u>Directions to the Site</u>					
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 of all property lines, underground utility lines, and					

making the site accessible so that a will can be properly constructed according to the permit.



PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

RA-30 Criteria Certification

1, Ophen Startley Cotton	, landowner/agent of Parcel Identification Number A-30 Zoning District, do hereby certify the following:
The multi-section manufactured home sh	all meet the following appearance standards, rior 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