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Initial Application Date:_		<u>·                                    </u>	<u>'</u>	<u> </u>

Application #	15500	26608
	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!" 7. Sookntact No: 7/ Mailing Address: APPLICANT\* Email: Contact No: City: \*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: State Road Name Deed Book & Page: ogress Energy as service provider need to supply premise number from Progress Energy. **PROPOSED USE:** Monolithic SFD: (Size \_\_\_\_x \_\_\_) # Bedrooms: \_\_\_ # Baths: \_\_\_ Basement(w/wo bath): \_\_\_ Garage: \_\_\_ Deck: \_\_\_ Crawl Space: \_\_\_ Slab: (Is the bonus room finished? (\_\_\_) yes (\_\_\_) no w/ a closet? (\_\_\_) yes (\_\_\_) no (if yes add in with # bedrooms) # Baths\_\_\_ Basement (w/wo bath)\_\_\_ Garage:\_\_\_ Site Built Deck:\_\_\_\_ On Frame\_\_\_ Off Frame\_\_ x ) # Bedrooms (Is the second floor finished? (\_\_\_) yes (\_\_\_) no Any other site built additions? (\_\_\_) yes (\_\_\_) no \_) # Bedrooms: \_\_\_\_ Garage:\_\_\_(site built?\_\_\_) Deck:\_\_\_(site built?\_\_\_) No. Bedrooms Per Unit:\_\_\_ Duplex: (Size \_\_\_x\_\_\_) No. Buildings:\_\_\_ Use:\_\_\_\_\_ Hours of Operation:\_\_\_\_\_ #Employees: Addition/Accessory/Other: (Size \_\_\_\_x \_\_\_) Use: \_\_\_\_\_ Closets in addition? (\_\_) yes (\_\_) no Gounty \_\_\_\_\_ Existing Well \_\_\_\_\_ New Well (# of dwellings using well \_\_\_\_\_\_) \*Must have operable water before final 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 (\_\_\_) Does the property contain any easements whether underground or overhead ( $\frac{1}{2}$ ) yes (\_\_) no Other (specify): Manufactured Homes Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Front Minimum Rear Closest Side

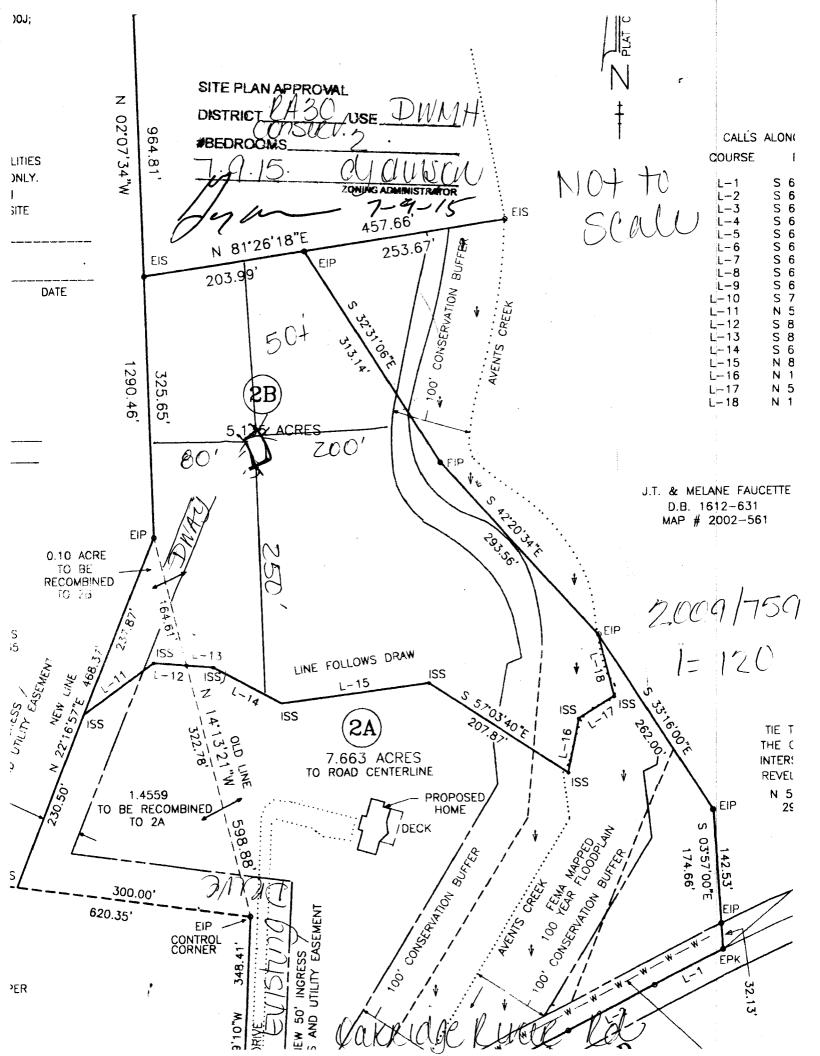
Residential Land Use Application

Sidestreet/corner lot Nearest Building on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 4015 Left on the.	5tralia
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 4015 Left on the.  Since Rd Imi on Left	<u>-</u>
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 plat I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is possible to the possible of the state of North Carolina regulating such work and the specifications of plate.	ns submitted. ovided.

<sup>\*\*\*</sup>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.\*\*\*

<sup>\*\*</sup>This application expires 6 months from the initial date if permits have not been issued\*\*



NAME:	Gar	y Mauke	NS	APPLICATION #:	550036408
	, ,	*This application to be filled	l out when anniving f	an a cantia ayatam inanaatia.	_ •
Cou	inty Health D	epartment Application	for Improvement	or a sepue system inspection Parmit and/or Authori	n. T
IF THE I	NFORMATION IN	I THIS APPLICATION IS FALS	SIFIED, CHANGED, OR	THE SITE IS ALTERED. THE	N THE IMPROVEMENT
PERMIT	OR AUTHORIZA	TION TO CONSTRUCT SHAL	L BECOME INVALID. 1	The permit is valid for either 60.	months or without expiration
dependin	g upon documentat	ion submitted. (Complete site pl	an = 60 months; Complete	e plat = without expiration)	010202
\ Fn	910-893-7525	option i <i>e<mark>alth New Septic System</mark></i> (	Sada 000	CONFIRMATION #	1000
V <u>-111</u>	All property i	ons must be made visib	Joue 800 Ja Place "nink prop	orty flago" on each corne	1.10.15
	lines must be c	learly flagged approximate	lv every 50 feet betwe	enty liags on each come	r iron of lot. Air property
•	Place "orange	house corner flags" at each	corner of the propos	sed structure. Also flag dr	iveways garages decks
	out buildings, s	wimming pools, etc. Place	flags per site plan de	eveloped at/for Central Per	rmittina.
•	Place orange E	nvironmental Health card i	n location that is easi	ly viewed from road to ass	sist in locating property.
•	If property is the	ickly wooded, Environmen	tal Health requires th	at you clean out the unde	rgrowth to allow the soil
	All lots to be	e performed. Inspectors sh addressed within 10 busin	louid be able to walk	freely around site. <i>Do not</i>	grade property.
	for failure to u	ncover outlet lid, mark h	ouse corners and n	roperty lines, etc. once l	ot confirmed ready
•	After preparing	proposed site call the voic	e permitting system a	at 910-893-7525 option 1 to	o schedule and use code
	800 (after selec	cting notification permit if n	nultiple permits exist)	for Environmental Health	inspection. Please note
	confirmation nu	mber given at end of recor	<u>ding for proof of requ</u>	<u>est.</u>	
• - <b>-</b>	Use Click2Gov	or IVR to verify results. Or	nce approved, procee	ed to Central Permitting for	permits.
		alth Existing Tank Inspec			
•	Prepare for ins	structions for placing flags pection by removing soil of	and card on property	v. unk as diagram indicatos	and lift lid atraight up (if
	possible) and the	nen <b>put lid back in place</b> .	(Unless inspection is	for a septic tank in a mobi	ile home park)
•	DO NOT LEAVE	LIDS OFF OF SEPTIC TANK	(		
•	After uncoverin	g outlet end call the voice	permitting system at	910-893-7525 option 1 &	select notification permit
	if multiple pern	nits, then use code 800 for	or Environmental He	alth inspection. <u>Please n</u> e	ote confirmation number
		recording for proof of reque or IVR to hear results. Onc		to Control Bormitting for r	compining normita
SEPTIC	OSC OHORZOOV	or twn to near results. One	e approved, proceed	to Gentral Fermitting for r	emaining permits.
		n to construct please indicate d	esired system type(s): c	an be ranked in order of prefer	rence, must choose one.
{}} A	ecepted	{}} Innovative {	} Conventional	{}} Any	
{}} A	Iternative	{}} Other			
The appl	icant shall notify	the local health department up	oon submittal of this an	nlication if any of the follow	ing apply to the property in
question.	If the answer is	"yes", applicant MUST ATT	ACH SUPPORTING	DOCUMENTATION:	mg appry to the property in
{}}YES	§ { <b>¥</b> } №	Does the site contain any Jur	isdictional Wetlands?		
{}}YES	NO (X)	Do you plan to have an <u>irriga</u>	ation system now or in	the future?	
{}}YES	S {Y} NO	Does or will the building cor	ntain any <u>drains</u> ? Please	explain	
{}}YES	{ <b>X</b> } NO	Are there any existing wells,	springs, waterlines or	Wastewater Systems on this p	property?
{}}YES	NO (X)	Is any wastewater going to b	e generated on the site	other than domestic sewage?	

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 Sololy 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.

Does the site contain any existing water, cable, phone or underground electric lines?

PROPERTY OWNERS OF OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property?

DATE

Thomas J. Boyce
P.O. Box 81
Pittsboro, NC 27312
919-868-8135
NC Licensed Soil Scientist # 1241
NC Registered Sanitarian # 1353

Cary Matthews
Re: 10+ac tract, Oakridg-River Rd., Stevan Houxell-owner
Dear Mr. Matthews,
A proliminary soils evaluation was completed on the above referenced property on Sept. 21, 2009.
The purposé of the evaluation was to determine the ability of the soils to support a subsurface
waste disposal system. All ratings and determinations were made in accordance with "Laws and
Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900".
The tract was evaluated by auger borings and landscape position. The typical usable soils were
or more inches. Provisionally suitable soils were
identified and are shown on the enclosed map. The long term acceptance rate will probably be
.3 gpd/sqft. Adequate area exists for a four bedroom house (50x70)
Unsuitable soils were due to setbacks to creeks or depth to seprette
Systems may be conventional, accepted, alternative or innovative. Systems may also require the
use of a pump, fill, or additional cover. Surface and/or subsurface drainage may be recommended
for the site.
This report does not guarantee or represent approval or issuance of permits as needed by the
local health department. This report only represents my opinion as a licensed soil scientist. Lot
clearing or grading may make the site unsuitable and is not advised until approval from the health
department. I trust this is the information that you require at this time. If you have any questions
or need assistance, please call.
Sincerely,
SO WAS JOO CELL
Thomas J. Baya
Thomas J. Boyce

Thomas J. Boyce
P.O. Box 81
Pittsboro, NC 27312
919-868-8135
NC Licensed Soil Scientist # 1241
NC Registered Sanitarian # 1353

Preliminary soils evaluation performed on 9.21.09

Stevan Howell 10 ac tract Oakridge-River Rd

Total: \$200.00

