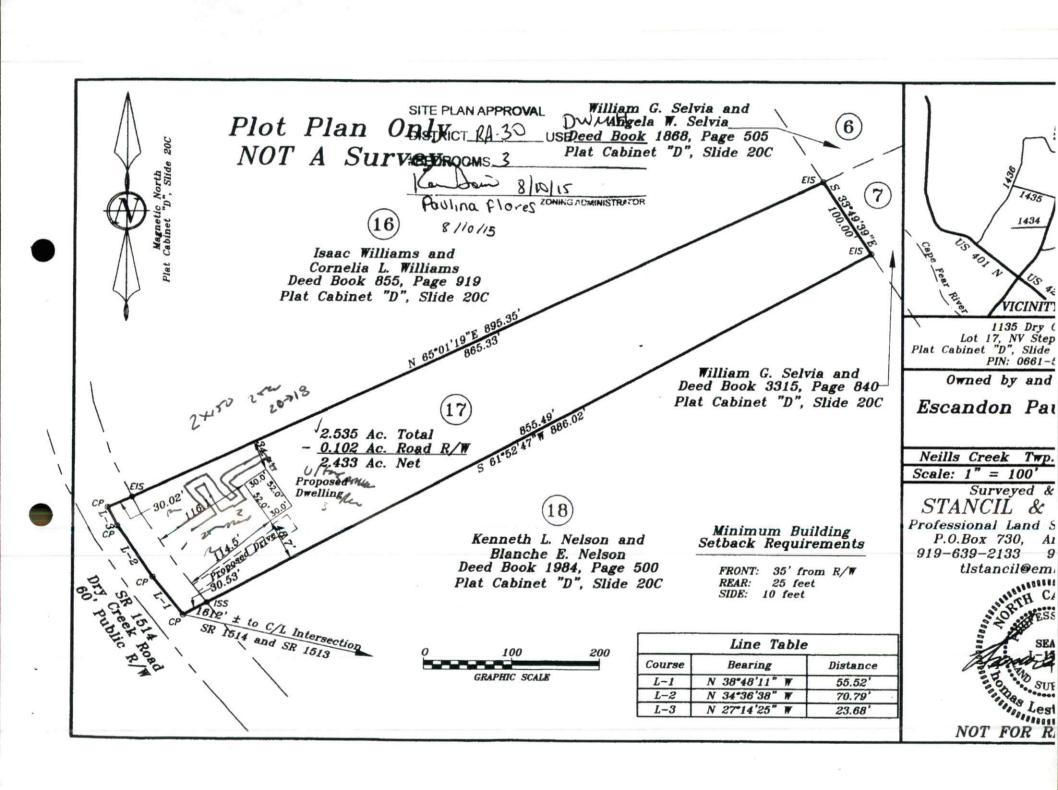
Initial Application Date: 8/0/15 Application #15-500 3 68
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/pei
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
LANDOWNER: Paulino Guzman Escando Mailing Address: 112 Judy Frances CN
City: Lilling ton State: N Zip: £759 Contact No: 914 795 6378 Email:
APPLICANT : Pouling Flores Mailing Address: 112 Judy Frances LH
City: Lillington State: VC Zip: 27.5% Contact No: 9/9 521 10/0 Email: *Please fill out applicant information if different than landowner
PROPERTY LOCATION: Subdivision: NV Stephenson 1135 process Lot 17 Lot size 243
State Road # 210 State Road Name: Map Book & Page: Cis / Parcel: 110660 OGY 17 PIN: 0661-54-7944-333
Parcel: 11 060 0074 1) PIN: 0601-37-1747-335
Zoning: PA 30 Flood Zone: X Watershed: WS-IV Deed Book & Page: 03274, 6774 Power Company*:
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
☐ SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Sl
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 (SizeS > xS =edrooms3Garage: (site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () r
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 3 S Actual
Rear 25
Closest Side 10
idestreet/corner lot
learest Building
Residential Land Use Application Page 1 of 2 03/11 APPLICATION CONTINUES ON BACK

8/11/15

on right.	ole couts Rd Ty nto Dry Creen	/L onto MEAT. Nei 115
on right.	DIE COUNT RE T	/L onto MAT. Neills
on right.	nto Dry Creen	Rd. destination
on right.		
J		
its are granted I agree to conform to all ordinan-	es and laws of the State of North Carolina regr	ulating such work and the specifications of plans sub-
by state that foregoing statements are accurate a	d correct to the best of my knowledge. Permi	it subject to revocation if false information is provided.
Poul na Chares Signature of Owner		8-10-15

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



Adams Soil Consulting 1676 Mitchell Road Angier, NC 27501 919-414-6761

January 9, 2015 Project # 283

Attention: Scotty Scarborough

RE: Soil/Site evaluation for approximately 2.3 acres located at 1135 Dry Creek Road Lillington, NC.

Mr. Scarborough,

Adams Soil Consulting completed a soils evaluation per your request for the above parcel located at 1135 Dry Creek Road in Harnett County. The soil/site evaluation was performed using hand auger borings, under moist soil conditions, based on the criteria found in the State Subsurface Rules, 15ANCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems". The suitable soils shown on the accompanying soil map are suitable for a conventional type initial and repair area for at least one 3-bedroom home. The lot contains greater than 20,000 ft² of suitable soils that consist of clay subsoil that can support a daily loading rate of 0.3-0.35 gallons/day/ft². Generally around 10,000 ft² of suitable soils are needed for a 3-bedroom septic system and repair area. A pump may be required on the septic system depending on the final site plan and if the home plumbing is not sufficient to dose the septic field. The specific septic system and loading rates for this lot will be permitted by the Harnett County Health Department. The areas for the proposed septic fields shall not be impacted by home sites, pools, garages and shall not be mechanically altered from the natural lay of the land.

The lot will require a detailed soils evaluation by the Harnett County Health Department prior to issuance of any permits for a septic system. A septic system layout may be required before a permit can be issued on the above referenced lot demonstrating available space for the primary and repair septic areas. Due to the subjective nature of the permitting process and the variability of naturally occurring soils, Adams Soil Consulting cannot guarantee that areas delineated as suitable for on-site wastewater disposal systems will be permitted by the governing agency. The accompanying soil map is preliminary in nature, no further assumptions or subdivision should be made without a more detailed evaluation.

Please give me a call if you have any questions.

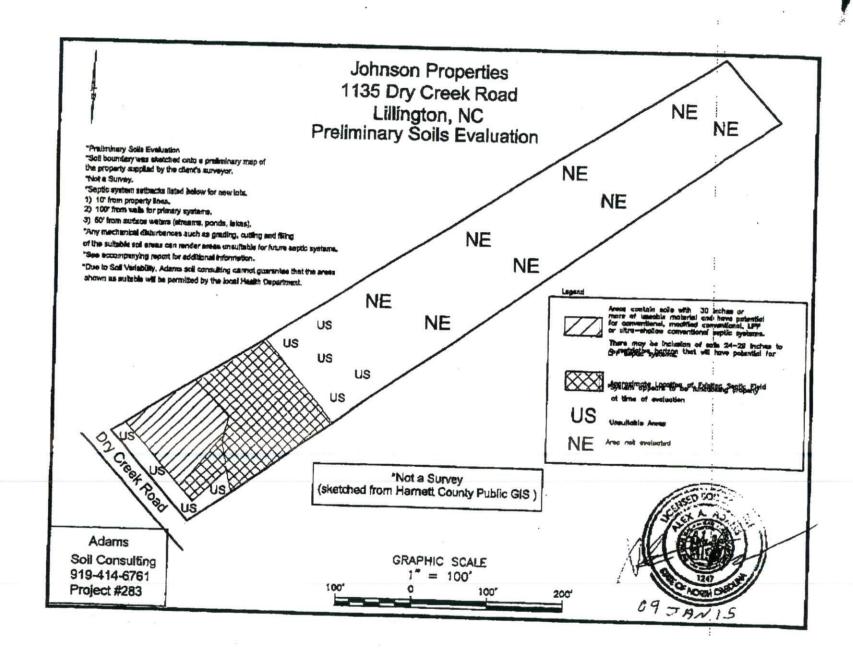
Sincerely

Alex Adams

NC Licensed Soil Scientist #1247

Encl: Soils Map

C ADRIN CISCUS



		17 - 2 - 2 - 3
NAME: P	aulina Flo	APPLICATION #: 15.700 3 6 8
	7	his application to be filled out when applying for a septic system inspection.
County	Health Der	artment Application for Improvement Permit and/or Authorization to Construct
PERMIT OR	AUTHORIZATI	HIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT ON TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration
depending upo	on documentation	submitted. (Complete site plan = 60 months; Complete plat = without expiration)
910	-893-7525 op	submitted. (Complete site plan = 60 months; Complete plat = without expiration) ion 1 CONFIRMATION #
X Environ	nmental Heal	n New Septic System Code 800 Trans # 00 2 70 177 6
line	property iron s must be clea	s must be made visible. Place "pink property flags" on each corner iron of lot. All property rly flagged approximately every 50 feet between corners.
• Plac	ce "orange ho	ise corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,
out	buildings, swi	nming pools, etc. Place flags per site plan developed at/for Central Permitting.
• Plac	e orange En	ronmental Health card in location that is easily viewed from road to assist in locating property.
If prevalent	operty is thick luation to be p	ly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil erformed. Inspectors should be able to walk freely around site. Do not grade property .
• <u>All</u>	lots to be ad	ressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
tor	<u>failure to unc</u>	over outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
Afte	r preparing pr	posed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code
conf	firmation num	g notification permit if multiple permits exist) for Environmental Health inspection. <u>Please note</u> er given at end of recording for proof of request.
• Use	Click2Gov or	IVR to verify results. Once approved, proceed to Central Permitting for permits.
□ <u>Environ</u>	mental Healt	Existing Tank Inspections Code 800
• Follo	ow above inst	uctions for placing flags and card on property.
Prep	pare for inspe	tion by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if
• DO I	NOT LEAVE LI	put IId back in place. (Unless inspection is for a septic tank in a mobile home park)
 After 	r uncovering o	utlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
if m	ultiple permits	then use code 800 for Environmental Health inspection. Please note confirmation number
		ording for proof of request. VR to hear results. Once approved, proceed to Central Permitting for remaining permits.
SEPTIC		
If applying for		construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{_}} Accept		_} Innovative { } Conventional { } Any
{_}} Alterna	tive {	_} 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 th	e answer is "ye	s", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES {	/) NO D	es the site contain any Jurisdictional Wetlands?
}YES {.	NO D	you plan to have an irrigation system now or in the future?
{_}}YES {.	NO D	es or will the building contain any drains? Please explain
}YES {.	√) NO A	there any existing wells, springs, waterlines or Wastewater Systems on this property?
) YES {	NO Is	ny wastewater going to be generated on the site other than domestic sewage?
YES {_	NO Is	he site subject to approval by any other Public Agency?
}YES {.	NO Ar	there any Easements or Right of Ways on this property?
) YES {2	√] NO Do	es the site contain any existing water, cable, phone or underground electric lines?
		ves please call No Cuts at 800-632-4949 to locate the lines. This is a free service.
Have Read Th		nd Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
		ht Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
The second secon	Annual Control of the	· · · · · · · · · · · · · · · · · · ·

I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making

Pooling Cloves
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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

8-10-15 DATE