Initial Application Date:_	4	hu	117	
initial Application Date	-	In		_

Residential Land Use Application

Application #	17-5004/216
	0114

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793

Central Permitting

www.harnett.org/permits

03/11

	Warren Mailing Address: PO Box 1927
City: Donn State: N	C zip:28335 Contact No: 910-292-6349 Email: [warrenewartencompe
APPLICANT : GARY PEACOCK	Mailing Address: PO BOY 1927
	C Zip: 28335 Contact No: 910-890-3914 Email: grencocke warrencom
CONTACT NAME APPLYING IN OFFICE:	PARY PEACOCK Phone # 910-890-3914
PROPERTY LOCATION: Subdivision:	069 US 30   N Lot #: Lot Size: 15.0
State Road # State Road Name	Map Book & Page: 618
Parcel: 021515 0403	PIN: 1527-29-9017.000 d: 61S Deed Book & Page: 920 / 31 Power Company*: DVL
Zoning: 14-30 Flood Zone: X Watershe	d: 61S Deed Book & Page: 920 / 31 Power Company*: DVL
*New structures with Progress Energy as service pr	ovider need to supply premise number from Progress Energy.
PROPOSED USE:	Monolithic
	Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: S
	Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame hished? () yes () no Any other site built additions? () yes () no
☐ Manufactured Home: ✓SWDWTV	(Size 4 x 70 ) # Bedrooms: 3 Garage: (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 () 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 cont	nins a manufactured home within five hundred feet (500') of tract listed above? () yes (\sqrt{y}) no
Does the property contain any easements whether	underground or overhead (V) yes () no
Structures (existing or proposed): Single family dwe	
Required Residential Property Line Setbacks:	comments: * Conditionally approved for SWMH
Front Minimum 351 Actual 1500	in PA-30*
Rear 251 30'	
Closest Side 10' 250'	
Sidestreet/corner lot	
Nearest Building on same lot	

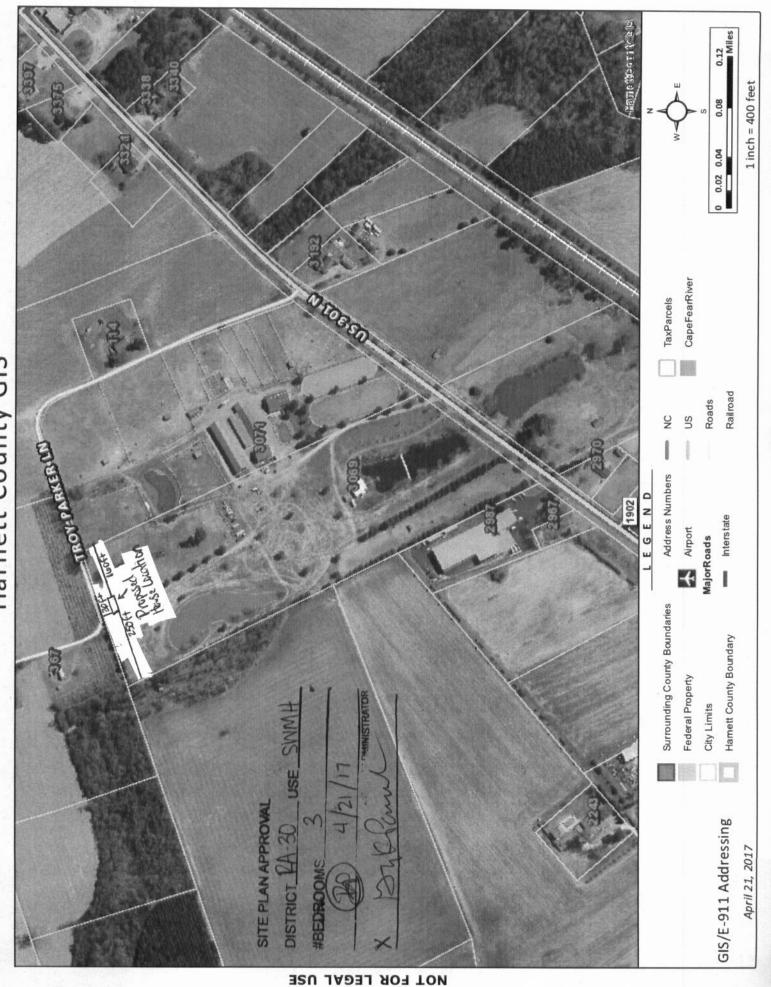
LOI TO DIKE	Take 301	RTY FROM LILLINGTON:	+ of Dun-	2 303	
to	3069		- 1		
10	2001				
The second					7,31
				25/25/25	
			19 19 19 19 19 19 19 19 19 19 19 19 19 1	Total Mary	- A Sc.
1					
		o all ordinances and laws of the re accurate and correct to the be			
	w	Illian	4	1-15-1	
	Clanatur	e of Owner or Owner's Agent		Date	

\*\*\*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\*\*

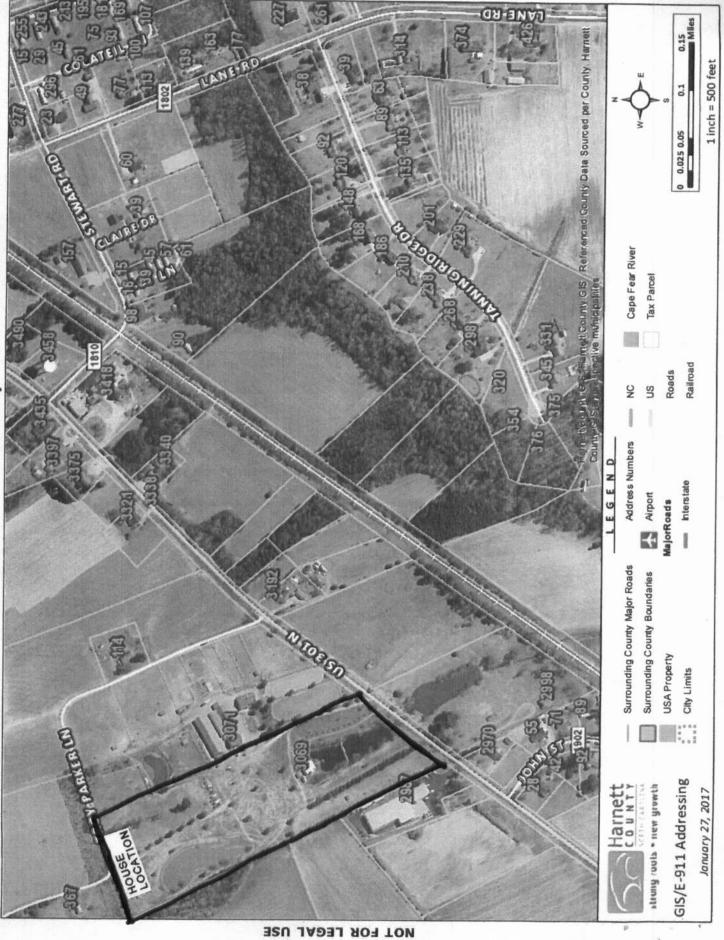
NAME:			APPLICATION #: 17-50041216
	*This application to b	ne filled out when applying	for a septic system inspection.*
County Health	Department Applic	ation for Improvement	t Permit and/or Authorization to Construct
IF THE INFORMATION	IN THIS APPLICATION I	S FALSIFIED, CHANGED, O	OR THE SITE IS ALTERED. THEN THE IMPROVEMENT
PERMIT OR AUTHORIZ	ATION TO CONSTRUCT	SHALL RECOME INVALID	The permit is valid for either 60 months or with and and incl.
depending upon document	ation submitted. (Complete	e site plan = $60 \text{ months}$ ; Comple	lete plat = without expiration)  CONFIRMATION # 021801
910-893-7525	option 1		CONFIRMATION # 021801
Environmental F	lealth New Septic Sy	stemCode 800	confirmation # 021801 Gavy to operty flags" on each corner iron of lot. All property flags are secured to the corner iron of lot.
<ul> <li>All property</li> </ul>	irons must be made	visible. Place "pink pro	operty flags" on each corner iron of lot. Altiproperty
mico madi be	ordarry magged approx	minately every 30 leet bety	ween comers.
<ul> <li>Place "orange</li> </ul>	house corner flags" a	at each corner of the prope	osed structure. Also flag driveways, garages, dec
out buildings,	swimming pools, etc.	Place flags per site plan	developed at/for Central Permitting.
<ul> <li>Place orange</li> </ul>	Environmental Health	card in location that is ea	asily viewed from road to assist in locating property
<ul> <li>If property is</li> </ul>	thickly wooded, Enviro	nmental Health requires	that you clean out the undergrowth to allow the
evaluation to	be performed. Inspec	tors should be able to wal	lk freely around site. Do not grade property.
All lots to be	addressed within 10	business days after co	onfirmation. \$25.00 return trip fee may be incur
for failure to	uncover outlet lid, m	ark house corners and	property lines, etc. once lot confirmed ready.
After preparin	g proposed site call th	e voice permitting system	n at 910-893-7525 option 1 to schedule and use co
and (after sei	ecting notification perr	nit if multiple permits exis	st) for Environmental Health inspection. Please n
Use Click2Go	iumber given at end of	recording for proof of req	quest.
Fruire mental I	v or IVR to verify result	its. Once approved, proce	eed to Central Permitting for permits.
Follow above	eaith Existing Tank I	Inspections Code 800	
Prepare for ir	instructions for placing	flags and card on proper	rty.
Prepare for it	then put lid beak in	soll over outlet end of	tank as diagram indicates, and lift lid straight up
• DO NOT LEAV	E LIDS OFF OF SEPTION	TANK	is for a septic tank in a mobile home park)
			at 910-893-7525 option 1 & select notification per
if multiple pe	mits then use code	800 for Environmental H	Health inspection. Please note confirmation num
given at end o	of recording for proof o	f request	realiti inspection. Flease note commination num
			ed to Central Permitting for remaining permits.
SEPTIC SEPTIC	v or rvir to mour roodin	o. Once approved, procee	ed to central remitting for remaining permits.
	ion to construct please inc	dicate desired system type(s):	can be ranked in order of preference, must choose one.
	{}} Innovative	{}} Conventional	{}} Any
Accepted			
Accepted Alternative	{}} Other		

{_}} Alte	rnative	{}} Other		
		y the local health department upon submittal of this application if any of the following s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	g apply to the proper	ty in
{_}}YES	{ <b>∠</b> } NO	Does the site contain any Jurisdictional Wetlands?		
{_}}YES	{√} NO	Do you plan to have an irrigation system now or in the future?		
{_}}YES	{√} NO	Does or will the building contain any drains? Please explain		
{}}YES	{}NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this pro	perty?	
{_}}YES	{ <b>√</b> } NO	Is any wastewater going to be generated on the site other than domestic sewage?		
{_}}YES	YES {\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}			
{✓}YES	{✓}YES {_} NO Are there any Easements or Right of Ways on this property?			
{_}}YES	{_}}YES {✓} NO 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	e.	
I Have Read	d This Applica	tion And Certify That The Information Provided Herein Is True, Complete And Correct.	<b>Authorized County</b>	And
State Offici	als Are Grante	ed Right Of Entry To Conduct Necessary Inspections To Determine Compliance With App	plicable Laws And R	ules.
I Understan	d That I Am S	Solely Responsible For The Proper Identification And Labeling Of All Property Lines And	l Corners And Makin	ng
The Site Ac	cessible So Th	at A Complete Site Evaluation Can Be Performed.		
		Willam	4-21-17	
PROPERT	TY OWNERS	S OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	DATE	



30' from Real

Harnett County GIS



## **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 <u>invalid</u>.

invalid.
A DRI LCA NEL INFORMATION
APPLICANT INFORMATION
GARY PEACOCK 910 1890-3914
Applicant/Owner US 301 N Dom NC 28334
Street Address, City, State, Zip Code
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
Single-Family   Multifamily   Church   Restaurant   Business   Irrigation    Street Address   3069   US 301   Subdivision/Lot #  Parcel # MUSIS DUD3   PIN # 1577-29-9017 000
Street Address 3069 US 301 N Subdivision/Lot#
Parcel # 021515 0403 PIN # 1527-29-9017.000
Directions to the Site
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, willer	Livia	Warren	lando	owner/ag	gent o	f Parcel	Ide	entificatio	on Nui	mber
021515	1403	, located								
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:

- The structure must be a multi-section unit built to the HUD code for manufactured homes.
- When located on the site, the longest axis of the unit must be parallel to the lot frontage.
- 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.
- 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.
- The tongue or towing device must be removed.

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

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

#### HARNETT COUNTY BOARD OF ADJUSTMENT

County Administration Building 102 East Front Street, Lillington, NC

#### April 10, 2017 at 6:30 PM

## FINDINGS OF THE BOARD OF ADJUSTMENT

Having heard the evidence in the following case at their regular meeting on April 10, 2017 the Harnett County Board of Adjustment makes the following findings of fact:

#### **Conditional Use**

BA-CU-08-17 Warren, William Irvin / Gary Peacock. A Singlewide Manufactured Home To

	A-30 Zoning District; PIN 1527-29-9017.000; Hwy US 301 North; Averasboro ship
1.	The requested use is / is not in harmony with the surrounding area and compatible with the surrounding neighborhood for the following reasons:  No opposition was expressed to the proposed use and similar uses are present in the area. Board members voted 5 of 5 in favor of the motion.
2.	The requested use will / will not materially endanger the public health and safety for the following reasons:  No evidence was presented that would verify that the proposed use would endanger the public health or safety. Board members voted 5 of 5 in favor of the motion.
3.	The requested use will / will not substantially injure the value of adjoining property, or, alternatively, the requested use is / is not or will / will not be a public necessity for the following reasons:  No professional evidence was presented that would verify that adjoining property values would be injured by the proposed use. Board members voted 5 of 5 in favor of the motion.
4.	The requested use will / will not meet all required conditions and specifications for the following reasons:  The proposed use will have to undergo the planning, permitting and inspection process to ensure that all specifications and regulations are met prior to the issuance of a certificate of occupancy. Board members voted 5 of 5 in favor of the motion.
5.	The requested use is / is not in general conformance with the Harnett County Unified Development Ordinance (UDO), Land Use Plan, and other relevant adopted plans for the following reasons:
	The proposed use is allowed as a Conditional Use per the Harnett County Unified Development Ordinance and will undergo the planning, permitting and inspection process to ensure compliance. Board members voted 5 of 5 in favor of the motion.
	tions to Consider: CONDITIONAL USE  GRANTED  DENIED

Cor



# **Residential Conditional Use Permit**

Planning Department 108 E. Front Street

P.O. Box 65, Lillington, NC 27546 Phone: (910) 893-7525

Fax: (910) 893-2793

	Receipt:
	Permit: 17-129
	Date: turned in 3.9-17 for 4-10-17 Case #:
Applicant Information  Owner of Record:  Name: William IRVIN WARREN  Address: 552 Welcome School RD  City/State/Zip: Autyville NC  E-mail: Iwwwen Cwarren company, com  Phone: 910-292-6349	Applicant: Name: GARY PEACOCK Address: PO BOX 1927 City/State/Zip: Dun NC 28335 E-mail: grencock@warrencompeny.Compeny
Property Description PIN(s): 1527-29-9017.000 Address/SR No.: 3069 US 301 N Directions from Lillington: Take HWY Ellis Quence. 6	Acreage: 15.01 acres  Dunn NC 28374  421 North to Dunn. Turn left on  10 1.2 miles and property is on the left.
Deed Book: 920 Page: 0031  Zoning District: RA-30  Flood Plain & Panel: N/A  Water: Public (Harnett County) Sewe	Plat Book: #C Page: 150 B Township: D Z Watershed Dist: NA
Requested Use: Conditional Use for _ 5115le Wide Manual	futured Home
Required Information: (Applications w. 1. Is an Erosion and Sedimentation Control Plan red If yes, is one on file?   No Yes (Please a	nuired?   V No     Yes
<ol><li>It is recommended that all non-residential develor concerning driveways and other traffic issues for</li></ol>	opments have preliminary discussions with NC DOT
3. Is a Driveway Permit required? ☑ No ☐ Yes If yes, is one on file? ☐ No ☐ Yes (Please a	attach a copy to your application)
<ol> <li>Have you contacted applicable local, state, and fe possible code compliance issues?    ☐ No ☐ Yes</li> </ol>	ederal agencies regarding building, fire, and other

**Sketch Plan Required:** Provide a sketch plan along with application. It is <u>strongly encouraged</u> that sketch plans be prepared by a NC Professional Land Surveyor and that it meet the following (as applicable):

TITLE BLOCK INFORMATION	
Name of Project & Date (Including all Revision Dates)	
Applicant/Owner(s) Contact Information (Name, Address, & Phone)	
Surveyor/Engineer Contact Information (Name, Address, & Phone)	
Parcel ID Number/Tax ID of Tract(s)	
Deed Reference of Tract(s)	
Zoning Classification of Tract(s)	
Location (Including Township, County, & State)	
Flood Plain Depicted & Noted (Zone, Map Number, & Effective Date)	
Watershed District Noted & Extent of Coverage Depicted	
GENERAL REQUIREMENTS	STATISTICS.
Map Size 22" x 34" & Scale 1"=100' or Larger	
North Point, Graphic Scale, & Vicinity Map	
Name(s) & Location(s) of Adjacent Property Owner(s) & Use(s)	
existing Boundaries of Tract(s) Showing Bearings & Distances	
Gross Acreage of Development	
Name(s) & Right(s)-of-way of Streets & State Road Number(s), Including Notation of Public or Private	
Name, Location, Width, & Acreage of Additional Easement(s) &	
Right(s)-of-way Within or Adjacent to Site	
Building Envelope & Required Setbacks	
existing & Proposed Utilities	H
existing Structure(s) Located on Site	+ +
ire Hydrant(s) & Street Light(s) Noted	+ +
BUFFERING REQUIREMENTS	
Suffering Regulations (Per Harnett County Zoning Ordinance)	

### **Signatures**

I, as the landowner, hereby CERTIFY that the information contained herein is true to the best of my knowledge; and by accepting this Permit (if approved) shall in every respect conform to the terms of this application and to the provisions of the Statutes and Ordinances regulating development in Harnett County. Any VIOLATION of the terms above stated immediately REVOKES this Permit. I further understand this structure is not to be occupied until a CERTIFICATE OF OCCUPANCY is issued. This Permit expires 12 months (1 year) after the date the Permit is granted by the Harnett County Board of Adjustment.

Property Owner Signature

3-9-17 Date

<b>Written Statement</b> ** Applicant is required to answer the following questions under oath at the Board of Adjustment Meeting – Please print answers **
Public Convenience & Welfare
1. Why are you requesting this use? To create housing for an employee of
2. Why is this use essential or desirable to you? To have someone living near my assets to the business "Shedy Brook Stebles."
3. Why is this use essential or desirable to the citizens of Harnett County? So as to contin
On-site & Surrounding Land Uses
4. What is on the property now? one single wide wentectured home on the front side of property. This home will be placed on the near of the property.
5. What uses are on the surrounding properties in the general vicinity? Pastures and
6. How will the use you are requesting affect the surrounding properties, residents and businesses in the area? Describe in detail why and how it will or will not affect the surrounding area. there is no residents other than our current manufactored home close by.
Utilities, Access Roads, Drainage, etc
7. Please select one: ☐ Public (County) Water ☐ Private Well ☐ Public (County) Sewer ☐ Private Septic Tank
8. Describe the driveway (width and surface) that you will be using to enter and exit the property
9. Describe the drainage of this property. Sloped to near by pond
10. How is your trash and garbage going to get to the landfill? Dupster on adjacent
Traffic
11. Describe the traffic conditions and sight distances at the State Road that serves the property.  301 North outside of Duna City Lints. No intersection  Near Duna City Lints. No intersection
12. What is the approximate distance between your driveway and the next nearest driveway or intersection? The next driveway is to our business. It is 40 ft away
Conditions
13. State any conditions that you would be willing to consider as part of the approved Conditional Use Permit
14. Additional Comments the Board should consider in reviewing your application: The area of my property 15 a way from visibility as it is on the best side of the property. This will not affect anyone negatively. It will have a few or the property.

Action by the Board of Adjustment

The Board of Adjustment shall approve, modify, or deny the Application for Conditional Use Permit following the Public Hearing. In granting a Conditional Use Permit, the Board of Adjustment shall make written findings that the applicable regulations of the district in which it is located are fulfilled. With due regard to the nature and state of all adjacent structures and uses, the district within which it is located and official plans for future development, the Board of Adjustment shall also make written findings that the following provisions are fulfilled:

3.1 The requested use is in harmony with the surrounding area and compatible with the surrounding neighborhood.

3.2 The requested use will not materially endanger the public health and safety.

3.3 The requested use will not substantially injure the value of adjoining property, or, alternatively, the requested use is or will be a public necessity.

3.4 The requested use will meet all required conditions and specifications.

3.5 The requested use is in general conformance with the Harnett County Unified Development Ordinance (UDO), Land Use Plan, and other relevant adopted plans.

Note: There must be four (4) Board of Adjustment members present at the meeting to hear a request for a Conditional Use Permit. Four (4) out of the five (5) board members must vote in favor of grating the Permit. If only four (4) board members are present at the meeting then all four (4) must vote in favor of granting the Permit. If three (3) or fewer members vote in favor of granting the Conditional Use Permit, the request is denied.

\*\* I have received and read the above statement:

W W Signature