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nitial Application Date:	1/16/19	1.50.19

Application # SFD1808 - 10018	

CU#\_

Central Permitting

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

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\*

ANDOWNER: TVercon Inc. Mailing Address: P. O Box 64778,
city: Fayetteville state: NC zip: 28306 contact No: 910.717.5076 Email: +j@ivercon.net
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email: Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Troy Iverson Phone # 910.237.3461
PROPERTY LOCATION: Subdivision: Sweetwater 13 Farra Ct Lot #: 11 Lot Size: .38 ac State Road # 5R 2044 State Road Name: Will Lucas Rd. Map Book & Page: 2011 / 410
State Road # OR 2094 State Road Name: WIII LUCOS NO. Map Book & Page. 2011
Parcel: 010544 0004 19 PIN: 0544-47-7324.000
Zoning RAZOR Flood Cone: Make Watershed: No Deed Book & Page 3654 / 0133 Power Company South river from Progress Energy.
New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE:  SFD: (Size 47 x 50) # Bedrooms: 3 # Baths 25 Basement(w/wo bath): A Garage: Deck: Crawl Space: Slab: Slab: Slab:
SFD: (Size x
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 (Sizex) # Bedrooms: 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 contains a manufactured home within five hundred feet (500') of tract listed above? () yes ( <u>v</u> ) 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 35' Actual 39
Rear <u>25'</u> <u>75.9</u>
Closest Side 10' 15.5
Sidestreet/corner lot 20 NA
Nearest Building 10 th A
on same lot Residential Land Use Application Page 1 of 2 03/11

PECIFIC DIF	RECTIONS TO	THE PROPERTY FE	ROM LILLINGTON	l:		fel.	. all, l	•
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ereby state t	hat foregoing	to conform to all ordi statements are accura	nances and laws of the and correct to the	of the State of North the best of my know	n Carolina regula	ating such work ar	d the specification if false information	ons of plans submitt
10	7.344	Signature of Ow		008.191				nuon is provided.
es es	,	Signature of Ow	ner or Owner's A	gent	er. 0.1	Date		
20 00		11		-19	oce two	uc:		
It is the ow	ner/applicant	s responsibility to p	rovide the county				. Idaaca	Q
to: bound	ary information	s responsibility to p on, house location, incorrect or	inderground or o	verhead easemen	ts, etc. The cou	inty or its emplo	ees are not res	iding but not limit ponsible for any
701	פעל ליז דינו		Trusting injoining	ist !	ned within thes	e applications.**	Jamiain	
1.7	VC ICI DOD	**This application	expires 6 month	s from the initial	date if permits h	nave not been is	James Land	M20FG
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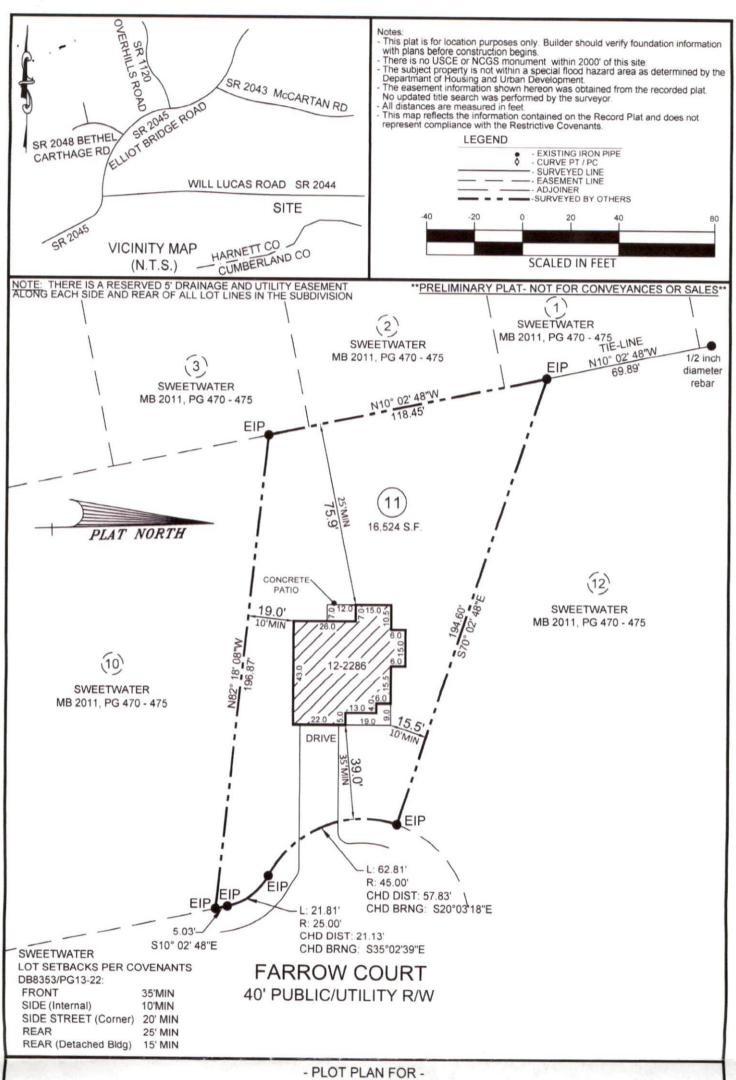
Page 2 of 2

03/11

Residential Land Use Application

NAME:	Tver	con Inc.	APPLICATION #:	
¢	,	This application to be filled o	out when applying for a septic system inspection.*	
IF THE IN PERMIT C depending	ITY Health De FORMATION IN OR AUTHORIZA upon documentati	partment Application for THIS APPLICATION IS FALSIF TION TO CONSTRUCT SHALL on submitted. (Complete site plan	or Improvement Permit and/or Authorizat FIED, CHANGED, OR THE SITE IS ALTERED, THEN TO BECOME INVALID. The permit is valid for either 60 mor in = 60 months; Complete plat = without expiration)	HE IMPROVEMENT
ç	10-893-7525	option 1	CONFIRMATION #	
	all property in	alth New Septic System Co	de 800 e. Place "pink property flags" on each corner iro every 50 feet between corners.	on of lot. All property
□ F	Place "orange h	nouse corner flags" at each own wimming pools, etc. Place fl	corner of the proposed structure. Also flag drive lags per site plan developed at/for Central Permit	tting.
	Place orange E	nvironmental Health card in ickly wooded. Environmenta	location that is easily viewed from road to assist I Health requires that you clean out the undergr	in locating property. <u>rowth</u> to allow the soi
- e	evaluation to be	e performed. Inspectors sho	uld be able to walk freely around site. Do not gra ess days after confirmation. \$25.00 return trip	fee may be incurred
<u>f</u>	or failure to u After preparing 300 (after selec	ncover outlet lid, mark hou proposed site call the voice cting notification permit if mu	use corners and property lines, etc. once lot concerns permitting system at 910-893-7525 option 1 to solution permits exist) for Environmental Health ins	onfirmed ready.  chedule and use code
C	confirmation nu	mber given at end of recordi	ing for proof of request.	
□ U Envi	Jse Click2Gov ronmental He	or IVR to verify results. One alth Existing Tank Inspecti	ce approved, proceed to Central Permitting for persons Code 800	illinis.
	ollow above in	structions for placing flags a	and card on property.	
	Prepare for inspossible) and the	pection by removing soil ov nen put lid back in place. (U	ver outlet end of tank as diagram indicates, an Unless inspection is for a septic tank in a mobile h	d lift lid straight up (i nome park)
	O NOT LEAVE	LIDS OFF OF SEPTIC TANK	permitting system at 910-893-7525 option 1 & se	lect notification permi
if	multiple pern	nits, then use code 800 for	Environmental Health inspection. Please note	confirmation number
C	iven at end of	recording for proof of reques	st.	
SEPTIC	Jse Click2Gov	or IVR to hear results. Once	approved, proceed to Central Permitting for rem	airiing permits.
If applyin	g for authorization	on to construct please indicate de	sired system type(s): can be ranked in order of preference	ce, must choose one.
{} Ac	cepted	{\sum_\text{Innovative} \{_	Conventional {} Any	
{ } Alt	ernative	{} Other		
The applic	cant shall notify If the answer is	the local health department upo "yes", applicant MUST ATTA	on submittal of this application if any of the following ACH SUPPORTING DOCUMENTATION:	apply to the property in
{}YES	{ <b>☑</b> NO	Does the site contain any Juris	sdictional Wetlands?	
{}YES	NO N	Do you plan to have an irrigat	ion system now or in the future?	
{_}}YES	{✓ NO	Does or will the building cont	ain any <u>drains</u> ? Please explain	
{}YES	( NO	Are there any existing wells, s	springs, waterlines or Wastewater Systems on this pro	perty?
{_}}YES	NO	Is any wastewater going to be	generated on the site other than domestic sewage?	
{_}}YES	{ <b>≥</b> } NO	Is the site subject to approval	by any other Public Agency?	
{}YES	{ <b>≥</b> NO	Are there any Easements or R	ight of Ways on this property?	
YES	{} NO	Does the site contain any exist	ting water, cable, phone or underground electric lines'	?
		If yes please call No Cuts at 8	300-632-4949 to locate the lines. This is a free service	3.
I Have Re	ad This Applicat	on And Certify That The Inform	nation Provided Herein Is True, Complete And Correct.	Authorized County And
			cessary Inspections To Determine Compliance With App	
l Understa	and That I Am &	olely Responsible For The Proper	Identification And Labeling Of All Property Lines And	Corners And Making
The Site A	coessible So Tha	t A Complete Site Evaluation Ca	n Be Performed.	. 1. 1.0
PROPER	TY OWNERS	OR OWNERS LEGAL REPI	RESENTATIVE SIGNATURE (REQUIRED)	DATE

PROPERTY OWNERS OF OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)



- PLOT PLAN FOR - IVERCON, INC.



## Cash Register Receipt Harnett County

## Receipt Number R2206

DESCRIPTION			QTY	PAID
PermitTRAK				\$750.00
SFD1808-0018	\$750.00			
ENVIRONME	NTAL HEALTH FEES			\$750.00
NEW SOIL ANALYSIS FEE 0				\$750.00
TOTAL FEES PAID B	Y RECEIPT: R2206			\$750.00

Date Paid: Thursday, January 31, 2019

Paid By: IVERCON INC.

Cashier: DJ

Pay Method: CHECK 6756

