1-18-19-1.30.19 Initial Application Date:

Nearest Building on same lot

Residential Land Use Application

Application #	SFD	808-	0033

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0	1 1#				

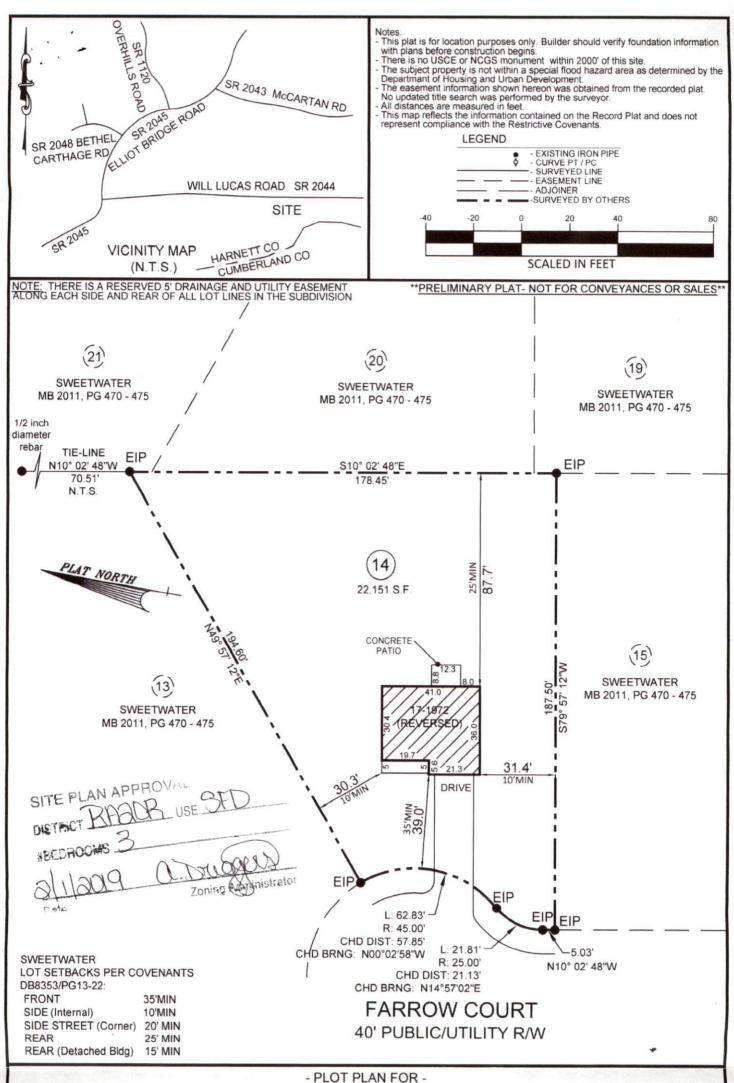
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Fax: (910) 893-2793 www.harnett.org/permits Phone: (910) 893-7525 ext:2 108 E. Front Street, Lillington, NC 27546 Central Permitting \*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\* Mailing Address: LANDOWNER: LState: N Czip:28300contact No: 910. 717-5076 Email City: Mailing Address: APPLICANT\*: Contact No: State: City: \*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: State Road Name: PIN 00 Watershed: NO Deed Book & Page 3655 Ole 36 Power Company from Progress Energy. \*New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: Monolithic Deck: Slab: SFD: (Size 41 x 36) # Bedrooms: 5 # Bath Basement(w/wo bath):\_\_\_\_ Garage:\_\_ Crawl Space: 1 (Is the bonus room finished? (\_\_\_) yes (\_\_\_) no w/ a closet? (\_\_\_) yes (\_\_\_) no (if yes add in with # bedrooms) \_) # 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 \_\_\_DW \_\_\_TW (Size\_\_\_\_x\_\_\_\_) # Bedrooms: \_\_\_\_ Garage:\_\_\_(site built?\_\_\_) Deck:\_\_\_(site built?\_\_\_) Duplex: (Size \_\_\_\_x \_\_\_) No. Buildings: \_\_\_\_\_ No. Bedrooms Per Unit: Home Occupation: # Rooms: Use: Hours of Operation: Closets in addition? (\_\_) yes (\_\_) no Addition/Accessory/Other: (Size \_\_\_\_x\_\_\_) Use:\_\_\_\_ County \_\_\_\_\_ 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 (\_\_/) no Does the property contain any easements whether underground or overhead (\_\_\_) yes (\_\_\forall ) no Other (specify): Manufactured Homes: Structures (existing or proposed): Single family dwellings: posed Required Residential Property Line Setbacks: Comments: Front Rear Closest Side Sidestreet/corner lot

> Page 1 of 2 APPLICATION CONTINUES ON BACK

03/11

CIFIC DIRECTIONS TO	THE PROPERTY F	ROM LILLINGT	ON:		74	51-	51-1		
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nits are granted I agree	to conform to all or	dinances and lay	vs of the State o	of North Carolin	a regulating s	such work and t	he specificat	ions of plai	ns subn
by state that foregoing s					MOTA A	to revocation i	f false inform	ation is pro	ovided.
. Slac	Signature of Ov	vner or Owner's	s Agent	stowi		Date			
the owner/applicants	responsibility to	araulda sha a	J. Jone	A	Λ.	**	Lilian	6.	
the owner/applicants boundary informatio	n, house location, incorrect of	underground or missing infor	or overhead east mation that is	oplicable infor sements, etc. contained with	mation abou The county on ain these apr	t the subject p r its employee lications ***	roperty, inc s are not re	luding but sponsible	not lim
outh River	<b>7</b> 0	Cioble	2005		011	700	4M	202	RA:
	**This application	on expires 6 mo	nths from the i	nitial date if p	ermits have	not been issue	d**	71.00	1 1/1
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NAME:	con Inc. APPLICATION#:
	*This application to be filled out when applying for a septic system inspection.*
County Health D	epartment Application for Improvement Permit and/or Authorization to Construct
IF THE INFORMATION IT	TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration
depending upon documenta	ion submitted. (Complete site plan = 60 months; Complete plat = without expiration)
910-893-7525	
Environmental He	alth New Septic System Code 800
All property i	ons must be made visible. Place "pink property flags" on each corner iron of lot. All property
lines must be o	learly flagged approximately every 50 feet between corners.
☐ Place "orange	house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,
out buildings, s	wimming pools, etc. Place flags per site plan developed at/for Central Permitting.  Environmental Health card in location that is easily viewed from road to assist in locating property.
<ul><li>☐ Place orange t</li><li>☐ If property is the</li></ul>	ickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil
evaluation to b	e performed. Inspectors should be able to walk freely around site. Do not grade property.
☐ All lots to be a	addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
for failure to u	ncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
After preparing	proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code
800 (after sele	cting notification permit if multiple permits exist) for Environmental Health inspection. <u>Please note umber given at end of recording for proof of request.</u>
Use Click2Gov	or IVR to verify results. Once approved, proceed to Central Permitting for permits.
	alth Existing Tank Inspections Code 800
□ Follow above i	nstructions for placing flags and card on property.
☐ Prepare for ins	spection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if
possible) and t	hen 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 g outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
After uncovering     if multiple periods	nits, then use code 800 for Environmental Health inspection. Please note confirmation number
given at end of	recording for proof of request.
☐ Use Click2Gov	or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
SEPTIC	the standard of professional and an extension of profession of profession must choose one
25 S S S S S S S S S S S S S S S S S S S	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
Accepted  Alternative	{ <u>V</u> } Innovative {} Conventional {} Any {} Other
The applicant shall notify question. If the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
	Does the site contain any Jurisdictional Wetlands?
{_}YES { <b>⊻</b> } NO	gg - the basic to the American Conference of the
(_)YES (✓) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}YES { <b>⊻</b> } NO	Does or will the building contain any <u>drains</u> ? Please explain
YES {NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
YES Y NO	Is any wastewater going to be generated on the site other than domestic sewage?
YES Y NO	Is the site subject to approval by any other Public Agency?
(YES (¥_) NO	Are there any Easements or Right of Ways on this property?
{	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.
	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
	oldy Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
The Site Accessible So Tha	tt A Complete Site Evaluation Can Be Performed.
PROPERTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE



- PLOT PLAN FOR -



## Cash Register Receipt Harnett County

## Receipt Number R2203

DESCRIPTION			QTY	PAID
PermitTRAK				\$750.00
SFD1808-0023	Address: 74 FARROW CT	APN: 0544-47-9368.000		\$750.00
ENVIRONME	NTAL HEALTH FEES			\$750.00
NEW	SOIL ANALYSIS FEE		0	\$750.00
TOTAL FEES PAID B	SY RECEIPT: R2203			\$750.00

Date Paid: Thursday, January 31, 2019

Paid By: IVERCON INC.

Cashier: DJ

Pay Method: CHECK 6756

