nitial Application Date:	1/16/19	1.30.1	9

on same lot

Residential Land Use Application

Application # SFD 1808 - 1005
OI III

03/11

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 State: NC Zip: 2330 Contact No: 910-717-5076 Email: Mailing Address: APPLICANT\*: Contact No: State: City: \*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: State Road Name: Will PIN: \_ Deed Book & Page: 3654 RISK Watershed: No from Progress Energy. \*New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: # Baths Basement(w/wo bath): Garage: Deck: Crawl Space: SFD: (Size 37 x 51) # Bedrooms: 4 (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\_ ) # Bedrooms (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: Use: Hours of Operation: Home Occupation: # Rooms:\_\_\_ Closets in addition? (\_\_\_) yes (\_\_\_) no Addition/Accessory/Other: (Size \_\_\_\_x\_\_\_) Use:\_\_\_ \_\_ 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 (\_V) no Does the property contain any easements whether underground or overhead (\_\_) yes (\_\_\_\_\_\_ no Structures (existing or proposed): Single family dwellings: Manufactured Homes: Required Residential Property Line Setbacks: Comments: Front Actual Rear Closest Side Sidestreet/corner lot Nearest Building

SPECIFIC DIRECTIONS T	O THE PROPERT	Y FROM LILLING	GTON:			P	olli		×
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If permits are granted I agre hereby state that foregoing	ee to conform to all g statements are a	obditate and boile	or to the pest of	III KIIOWIEGO	le. Permit sunie	ct to revoca	tion if falco inform	ions of plans nation is prov	submitte
***It is the owner/anglican	ote reenoneibility	to provide the sec	19.	19	howter	ratio	11110	luding but n	ot limite
to: boundary information	100	ct or missing inf	+400B;		9/1	G	0074 · MIW	sponsible fo	
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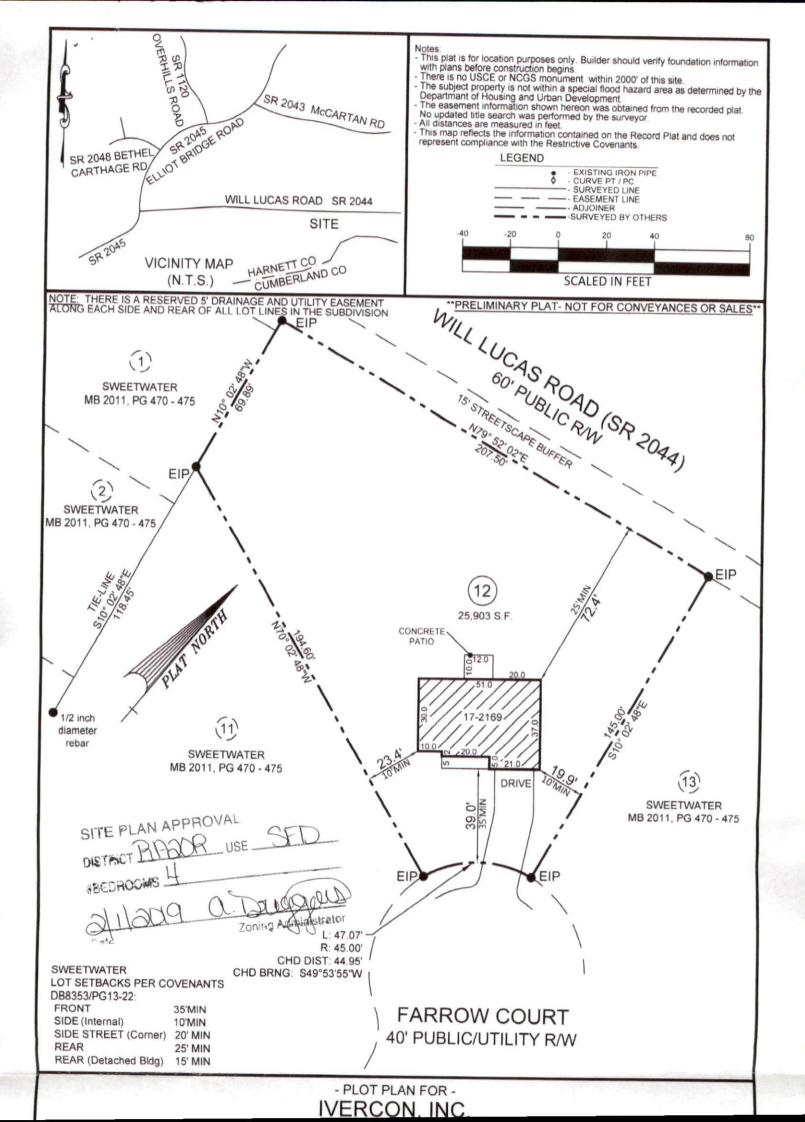
NAME: Iver	ron Inc.	APPLICATION #:	
County Health D	N THIS APPLICATION IS FALSIFIED, CHAI TION TO CONSTRUCT SHALL BECOME I tion submitted. (Complete site plan = 60 month	vement Permit and/or Authorization to Construct NGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT NVALID. The permit is valid for either 60 months or without expiration	
Environmental He	ealth New Septic System Code 800	pink property flags" on each corner iron of lot. All prope	ertv
lines must be o	clearly flagged approximately every 50	feet between corners.	
<ul> <li>Place "orange out buildings, s</li> </ul>	house corner flags" at each corner of to swimming pools, etc. Place flags per s	he proposed structure. Also flag driveways, garages, dec ite plan developed at/for Central Permitting.	KS,
□ Place orange E	Environmental Health card in location the	nat is easily viewed from road to assist in locating property	'. soil
evaluation to be	e performed. Inspectors should be abl	equires that you clean out the <u>undergrowth</u> to allow the set 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 incurr	ed
After preparing	proposed site call the voice permitting	rs and property lines, etc. once lot confirmed ready. system at 910-893-7525 option 1 to schedule and use co	ode
800 (after selection	cting notification permit if multiple perm	nits exist) for Environmental Health inspection. Please no	ote
□ Use Click2Gov	umber given at end of recording for pro or IVR to verify results. Once approve	ed, proceed to Central Permitting for permits.	
Environmental He	ealth Existing Tank Inspections Cod	e 800	
<ul><li>Follow above in</li><li>Prepare for ins</li></ul>	nstructions for placing flags and card o	n property. end of tank as diagram indicates, and lift lid straight up	(if
possible) and the	hen put lid back in place. (Unless ins	pection is for a septic tank in a mobile home park)	
<ul> <li>After uncovering if multiple perror</li> </ul>	mits, then use code 800 for Environn	system at 910-893-7525 option 1 & select notification per nental Health inspection. <u>Please note confirmation numb</u>	mit ber
☐ Use Click2Gov	frecording for proof of request.  or IVR to hear results. Once approved	I, proceed to Central Permitting for remaining permits.	
EPTIC	on to construct please indicate desired system	type(s): can be ranked in order of preference, must choose one.	
	{✓Innovative {_}} Convent		
	{} Other		
he applicant shall notify		of this application if any of the following apply to the property	/ in
_}YES {V NO	Does the site contain any Jurisdictional V	Vetlands?	
_}YES {✓ NO	Do you plan to have an irrigation system	now or in the future?	
_}YES {✓ NO	Does or will the building contain any dra	ins? Please explain	
YES {✓} NO	Are there any existing wells, springs, wa	terlines or Wastewater Systems on this property?	
_}YES {✓ NO	Is any wastewater going to be generated	on the site other than domestic sewage?	
_}YES {✓ NO	Is the site subject to approval by any other	r Public Agency?	
_}YES {✓ NO	Are there any Easements or Right of Wa	ys on this property?	
YES {_} NO	Does the site contain any existing water,	cable, phone or underground electric lines?	
	If yes please call No Cuts at 800-632-49	49 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 Solely 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.

PROPERTY OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1/16/19 DATE





## Cash Register Receipt Harnett County

Receipt Number R2205

DESCRIPTION			QTY	PAID
PermitTRAK				\$750.00
SFD1808-0025	Address: 81 FARROW CT	APN: 0544-47-7415.000		\$750.00
ENVIRONME	NTAL HEALTH FEES			\$750.00
NEW	SOIL ANALYSIS FEE		0	\$750.00
TOTAL FEES PAID B	Y RECEIPT: R2205			\$750.00

Date Paid: Thursday, January 31, 2019

Paid By: IVERCON INC.

Cashier: DJ

Pay Method: CHECK 6756

