Initial Application Date:_	10	03	18	
middi / ppiloddon Date				

Application #	SFDIS	810-0008
	0114	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

on same lot

Residential Land Use Application

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

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\* Mailing Address: 25 la NC State: NCzip: 28334 Contact No: 910-890-0108 Email: + Smith 11011988 2 gmail. Co SMITH Mailing Address: 256 NC HWY 82 State: NC Zip: 2833 Contact No: 910-890-0108 Email: + SMITH 12011988 @gmax \*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Phone # Lot #: Lot Size: Z. PROPERTY LOCATION: Subdivision: 1776 State Road Name: Old Hamilton Rd. Map Book & Page: 2018 / 28 Power Company\*: \*New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: Monolithic □ SFD: (Size \(\omega \times x \frac{57' 10}{2}\) # Bedrooms: \(\frac{7}{2}\) # Baths: \(\omega\) Basement(\(\omega\) bath): \(\omega\) Garage: \(\frac{7}{2}\) Deck: \(\frac{7}{2}\) Crawl Space: \(\frac{7}{2}\) Slab: (Is the bonus room finished? (\_\_) yes (\_\_) no w/ a closet? (\_\_) yes (\_\_) no (if yes add in with # bedrooms) Mod: (Size \_\_\_\_x\_\_\_) # 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: #Employees: Addition/Accessory/Other: (Size \_\_\_\_x\_\_\_) 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: X 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 (X\_) no Does the property contain any easements whether underground or overhead (\_\_\_) yes (X\_\_) no Manufactured Homes: Other (specify): Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Minimum Front Actual Rear Closest Side Sidestreet/corner lot Nearest Building

SPECIFIC DIRECTIONS	TO THE PROPERTY FROM LILLINGTON:			
	*			
				<del></del>
			Λ.	
If permits are granted I ag	ree to conform to all ordinances and laws of the S	tate of North Carolina re	gulating such work and the s	specifications of plans submitted
hereby state that foregoi	ng statements are accurate and correct to the best	of my knowledge. Perr	nit subject to revolcation if fal	se information is provided.
	21/2	>	10/02/2018	
· +	Signature of Owner or Owner's Agent		/Date /	
100	/			

\*\*\*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\*\*

STORE WEST

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APPLICATION #: SFD 1810-0008

\*This application to be filled out when applying for a septic system inspection.\*

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT

PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION #

Environmental Health New Septic SystemCode 800

- All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly 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, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil
  evaluation to be performed. Inspectors should be able to walk freely around site. *Do not grade property*.
- All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover 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 selecting notification permit if multiple permits exist) for Environmental Health inspection. <u>Please note</u> confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

#### Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then 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
- After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
  if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number
  given at end of recording for proof of request.

	se Click2Gov	or IVR to hear results. Once approved, proceed to Central Permitting for remains	aining permits.
SEPTIC If applying	for authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference	e, must choose one.
{}} Acc	epted	{} Innovative {} Conventional {} Any	
{}} Alte	rnative	{}} Other	
		the local health department upon submittal of this application if any of the following s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	apply to the property in
{_}}YES	{★} NO	Does the site contain any Jurisdictional Wetlands?	
{_}}YES	{ <u>X</u> } NO	Do you plan to have an irrigation system now or in the future?	
{_}}YES	{ <u>X</u> } NO	Does or will the building contain any drains? Please explain	
{}}YES	{ <u>X</u> } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this prop	erty?
{_}}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 Public Agency?	
{_}}YES	{_X} NO	Are there any Easements or Right of Ways on this property?	
{_}}YES	{X} 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.	
I Have Rea	d This Applica	tion And Certify That The Information Provided Herein Is True, Complete And Correct.	Authorized County And
State Offici	als Are Grante	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With App	licable Laws And Rules.
		olely Responsible For The Proper Identification And Labeling Of All Property Lines And	Corners And Making
-		at A Complete Site Evaluation Can Be Performed.	10/02/2018 DATE
PROPER'	TY OWNERS	S OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	DATE

## **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 invalid.

	APPLICA	ANT INFORMATION
	Travis Jay Smith	(910) 890-0108
256 NC Hwy	Applicant/Owner 82 Dunn NC 2833	Phone Number
	Street Address, City, State, Zip Co	
	<ol> <li>existing and/or proposed property lines and eas</li> <li>the location of the facility and appurtenance;</li> <li>the location for the proposed well;</li> <li>the location of existing or proposed sewer lines</li> <li>the location of any existing wells within 100 fe</li> <li>above ground and/or underground storage tank</li> <li>and any other known sources of contamination</li> <li>The Applicant shall notify the Harnett County</li> <li>Division of Environmental Health if any of the</li> <li>there is a relocation of the proposed facility;</li> <li>there is a change in the intended use of the faci</li> <li>there is a need for installing the waste water sy</li> <li>there are landscape changed that affect site dra</li> </ol>	es and/or sewage disposal systems within 100 feet or the proposed well; eet of the property; surface water bodies; es; a within 100 feet of the proposed well site.  Ey Health Director through or by way of the Harnett County e following occur prior to well construction:  Eility; estem in an area other than indicated on the well permit; or
	<u>PROPER</u>	RTY INFORMATION
		coposed use of well Church □ Restaurant □ Business □ Irrigation □  Subdivision/Lot #  PIN # 150(-14-850(-060)
	Hog Heaven Lame off	rections to the Site Old Hamilton Road, Dunn.
	correct to the best of my knowledge and is give in go	ation and certify that the information provided herein is true, complete and the complete with applicable rules.

I understand that I am splety responsible for the proper identification and labeling of all property lines, underground utility lines, and

making the site accessifile so that a will can be properly constructed according to the permit.

Property Owner's Owner's Legal Representative Signature Required

La Carpet Allendar

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tency applied



## Town of Erwin

# Zoning Application & Permit Planning & Inspections Department

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lo	ot
shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard	
dimensions.	

N. C. I. I.	_		D O	-r	r -11
Name of Applicant		y Smith	Property Owner	Ivavis Jay	Smith
Home Address	56 NC His	Jhway 82	Home Address	Travis Jay 256 NC H	ghwey 82
City, State, Zip	Dones, NO	28334	City, State, Zip	Dunn, NC	28334
Telephone (	910)890-	8010	Telephone	(910) 890-0	
Email 4	rsmith noi	1988 @ gmail.com	Email		788 @ gmail.com
Address of Proposed P	roperty		Hog Heaven	Ln . ated Project Cost	
Parcel Identification N	umber(s) (P	IN) 1506-14-8506.	Estim	ated Project Cost	7000x \$250K
What is the applicant re the proposed use of the	1.00	build / what is	New Ho	- 511	CK Built
Description of any propos				me	.500,
to the building or propert	1.7		NA	1	
What was the Previous			Formland		
Does the Property Acce			20		
Number of dwelling/st	ructures on	the property already	O Prop	perty/Parcel size	2.5 Acres
Floodplain SFHA		WatershedYes x		_Yes <u>V</u> No	
MUST circle one that app	olies to prope	rty Existing/Propose	d Septic System	Or	4 20 20
		Existing/Propose	d County/City Sewe	er	DAI
The undersigned property answers, statements, and o and belief. The undersignic application. Upon issuance gulations, and the laws of the undersigning party auto this application as approperty of this application as appropersion.	other informating party und e of this pern of the State of thorizes the	tion herewith submitted a lerstands that any incorre nit, the undersigning part North Carolina regulatin	are in all respects true ect information submi- ty agrees to conform to ag such work and to the	and correct to the b tted may result in th o all applicable towr ne specifications of p	est of their knowled e revocation of this n ordinances, zoning dans herein submitk
Travis Joy Sn		3/	de	10/03	118
Print Name		Signature of Owner	or Representative	Date	
For Office Use					
Zoning District	RD.	Existing Nonconform	0		
Front Yard Setback	40'	Other Permits Require			Fire Marshal 20the
		Requires Town Zoni			Prior to C. of O.
Side Yard Setback	121	Zoning Permit Status			-1
Rear Yard Setback	401	Fee Paid: 60	Date Paid: 16 3	Staff Initials	SIO
Comments New	Stic		SFO - Nee	J approva	(B) SOFFA

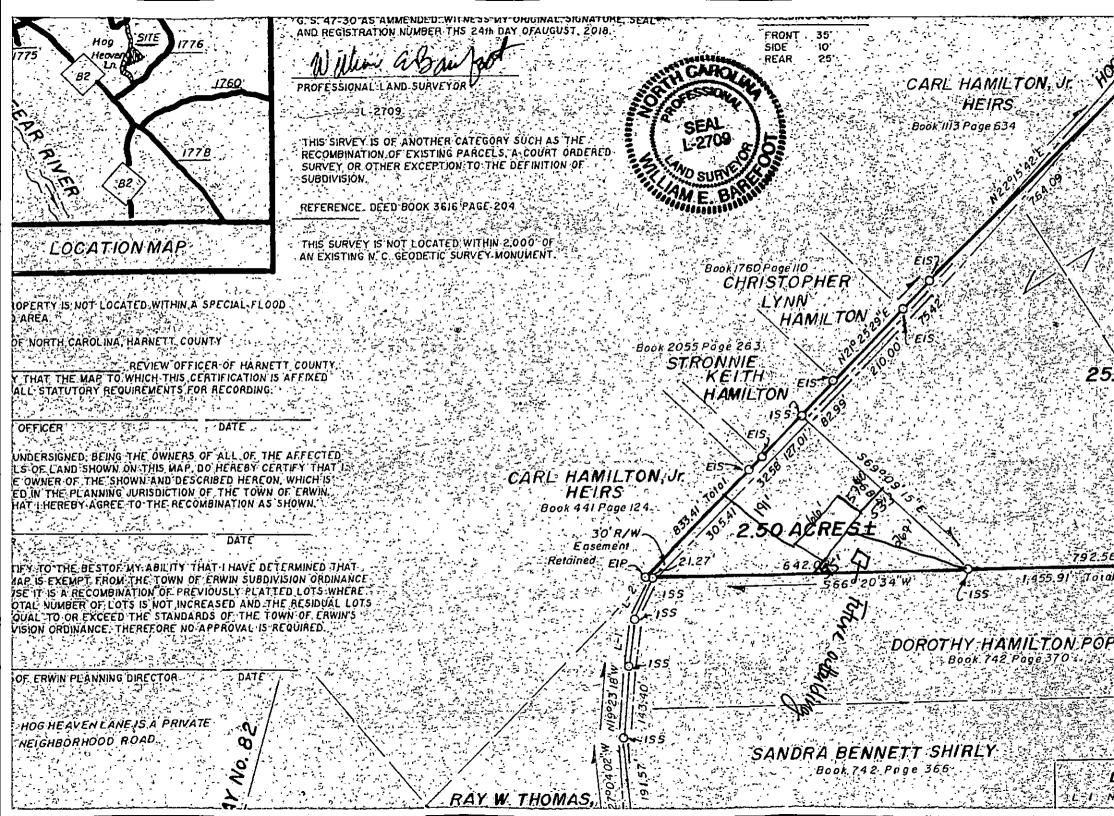
- Stick Built

New stick Built SFD - New approval to separ

Ban Double (2) 15/3/18

401

(°C)



Service Children

	bool not impt bio
House Dimensious:  (do! X57'10"  setbacks  - Grontyand - 191'  - Ghtside yand - 53'3"  - Doek yord - 267' (greet post)  - Doek yord - 267' (greet post)	The solution of the solution o
	Low Labour Cont 18 La



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