



Initial Application Date: 10/29/18

Application # SFD1810-0058

CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  
Central Permitting 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\*\***

LANDOWNER: Johnson James W III Trustee and James Johnson Jr. Trust Mailing Address: P.O. Box 316 AN  
City: Angier State: NC Zip: 27501 Contact No: Jimmy Johnson Email: jp@johnsonproperties.com

APPLICANT: TRUE HOMES Mailing Address: 2649 Brellan Ridge Centre Dr #104  
City: Monroe State: NC Zip: \_\_\_\_\_ Contact No: 919-522-9837 Email: mdanielson@truehomesusa.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Matthew Danielson Phone # 919-522-9837  
ADDRESS: 49 Paige Stoneway PIN: 06604-82-0546.000  
DEED OR OTP: OTP

**PROPOSED USE:**

- SFD: (Size 40 x 56) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath):  Garage:  Deck:  Craw Space:  Slab  Monolithic 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**  
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply:  New Septic Tank \_\_\_\_\_ Expansion \_\_\_\_\_ Relocation \_\_\_\_\_ Existing Septic Tank \_\_\_\_\_ County Sewer  
(Complete Environmental Health Checklist on other side of application if Septic)

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  no

Structures (existing or proposed): Single family dwellings: 1 proposed SFD Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Matthew Danielson  
Signature of Owner or Owner's Agent

10-26-18  
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\***  
**APPLICATION CONTINUES ON BACK**

strong roots • new growth

strong roots • new growth

**\*\*This application expires 6 months from the initial date if permits have not been issued\*\***

**\*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)

**Environmental Health New Septic System**

- **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 **undergrowth** 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.**

**Environmental Health Existing Tank Inspections**

- 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**

**"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"**

**SEPTIC**

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

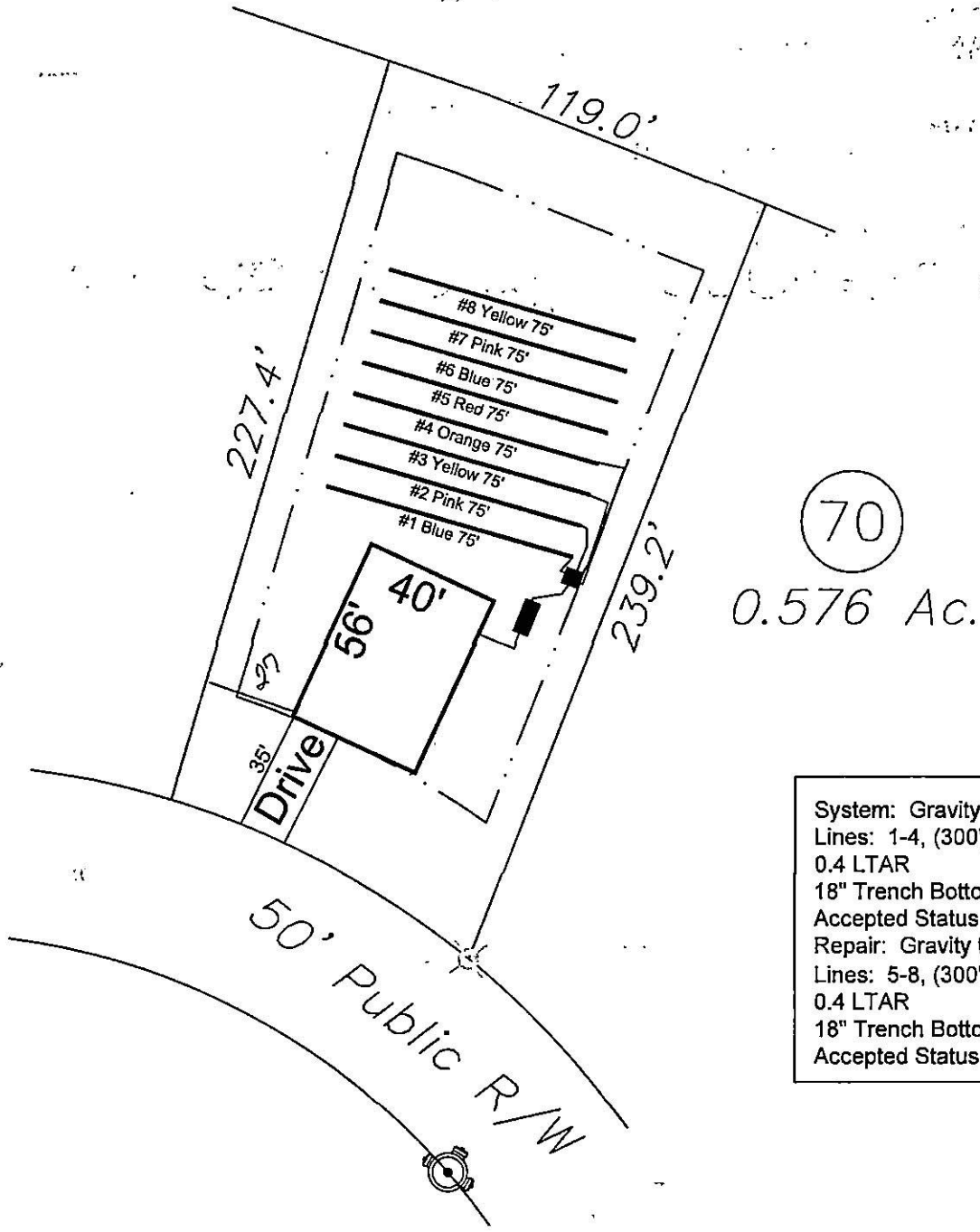
- Accepted     
  Innovative     
  Conventional     
  Any  
 Alternative     
  Other \_\_\_\_\_

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES     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 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 Public Agency?  
 YES     NO    Are there any Easements or Right of Ways 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 800-632-4949 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.**

# Crosslink Subdivision Lot #70 - True Homes 4-Bedroom Septic System Design



70

0.576 Ac.

<p>System: Gravity to D-Box                  Lines: 1-4, (300')                  0.4 LTAR                  18" Trench Bottom                  Accepted Status System                  Repair: Gravity to D-Box                  Lines: 5-8, (300')                  0.4 LTAR                  18" Trench Bottom                  Accepted Status System</p>
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GRAPHIC SCALE  
1" = 50'



Adams  
Soil Consulting  
919-414-6761  
Job #522

**Crosslink Subdivison Phase III**

Lot #70

4-Bedroom Home (480 gal./day)

<u>LINE #</u>	<u>COLOR</u>	<u>BS</u>	<u>HI</u>	<u>FS</u>	<u>ELEVATION</u>	<u>LINE LENGTH</u>	<u>Design Length</u>
TBM		2.0		100.0		<u>in field</u>	<u>installation</u>
INST. 1			102.0				
1	Blue			5.3	96.7	90	75
2	Pink			5.8	96.2	90	75
3	Yellow			6.3	95.7	90	75
4	Orange			6.7	95.3	90	75
5	Red			7.2	94.8	90	75
6	Blue			7.7	94.3	90	75
7	Pink			8.3	93.7	90	75
8	Yellow			8.9	93.1	90	75
Total							600

<b>System Type</b>	<u>System</u>	<u>Repair</u>
	Lines 1-4	Lines 5-8
	Accepted Status System	Accepted Status System
	EZ-FLOW	EZ-FLOW
Suggested Soil LTAR	0.40	0.40
Total Line Length	300	300
Square Footage	900	900
Proposed Trench Bottom	18"	18"
Distribution Method	Gravity to D-Box	Gravity to D-Box