

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Initial Application Date: 16 8

Application # 51-101810 - 0059

CU#

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 Auf Mailing Address: P.O. Box 310
City: ANGIER State NC Zip: 27501 Contact No: 919-639-2231 Email:
ABBLICANTE True Homes 2649 Breken sites 7 10 e johnson propertic
City: MONROR State: NC zipa 8/10 Contact No: MAtthew Varietor Email: modariels on e
CONTACT NAME APPLYING IN OFFICE: Matthew Danielson  Phone # 919-522-9837  ADDRESS: PIN: DOUGY-72-8584.000
ADDRESS: Crosslink Dr PIN: 0664-72-8584.000
DEED OR OTP: OTP
PROPOSED USE:
SFD: (Size 40 x 47) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: S
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) ☐ Garage: ☐ Site Built Deck: ☐ On Frame ☐ Off Frame ☐ Of
Manufactured Home: SW DW TW (Size x ) # 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 (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
Does the property contain any easements whether underground or overhead () yes () no
Structures (existing or proposed): Single family dwellings: 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.
Signature of Owner's Agent 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.***

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



#### \*\*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 <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.

#### ☐ 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

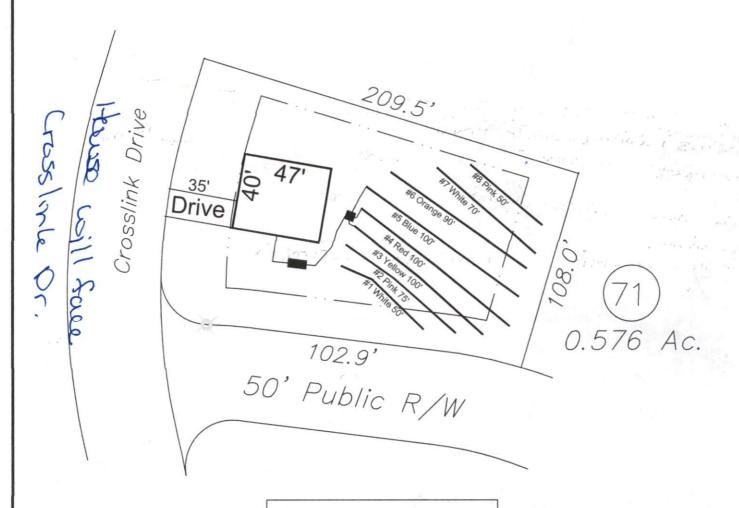
#### MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION'S

C		:		
ior autnorizati	on to construct please ind	icate desired system type(s): c	an be ranked in order of preference, must ch	loose one.
pted	{}} Innovative	(V) Conventional	{}} Any	
native	{}} Other		<del></del>	
				the property in
{≹} NO	Does the site contain a	ny Jurisdictional Wetlands?		
{∡}} NO	Do you plan to have a	n irrigation system now or in	the future?	
(X) NO	Does or will the buildi	ng contain any drains? Please	e explain	· 1
{ <del>\L</del> } NO	Are there any existing	wells, springs, waterlines or	Wastewater Systems on this property?	
{ <b>X</b> } №	Is any wastewater goir	ng to be generated on the site	other than domestic sewage?	Λ,
{ <u>₹</u> } NO	Is the site subject to ap	proval by any other Public A	gency?	
{ <b>X</b> } №	Are there any Easemen	nts or Right of Ways on this p	property?	
{ <b>X</b> } №	Does the site contain a	ny existing water, cable, pho	ne or underground electric lines?	
				•
This Applicat	tion And Certify That Th	e Information Provided Herein	Is True, Complete And Correct: Authoriz	ed County And State
	epted rnative ant shall notify f the answer is  { } NO { }	Innovative  Interpreted {_} Innovative  Interpreted {_} Other	content () Innovative () Conventional contains () Other	Internative    Other

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!

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# Crosslink Subdivision Lot #71 - True Homes 4-Bedroom Septic System Design



System: Gravity to D-Box Lines: 3-5, (300') 0.4 LTAR 24" Trench Bottom Accepted Status System Repair: Pressure Manifold Lines: 1-2, 6-8, (300') 0.4 LTAR 24" Trench Bottom Accepted Status System

 Adams Soil Consulting 919—414—6761 Job #522

### Crosslink Subdivison Phase III

True Homes - Lot #71 4-Bedroom Home (480 gal./day)

LINE#	<b>COLOR</b>	<u>BS</u>	<u>HI</u>	<u>FS</u>	ELEVATION	LINE LENGTH	Design Length
TBM		2.0		100.0		<u>in field</u>	<u>installation</u>
INST. 1			102.0				
1	White			2.5	99.5	56	50
2	Pink			2.7	99.3	75	70
3	Yellow			2.8	99.2	100	100
4	Red			3	99	100	100
5	Blue			3.3	98.7	108	100
6	Orange			3.5	98.5	90	70
7	White			3.7	98.3	72	70
8	Pink			4	98	50	50
Total							610

System Type	System Lines 3-5 Accepted Status System EZ-FLOW	Repair Lines 1-2, 6-8 Accepted Status System EZ-FLOW	
Suggested Soil LTAR	0.40	0.40	
Total Line Length	300	310	
Square Footage Proposed Trench Bottom	900 18-24"	930 18-24"	
Distribution Method	Gravity to D- Box	Pressure Manifold	