

Initial Application Date: 12/3/18

Application #SFD1812-600

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: Wimberly Javest Ments, LLC Mailing Address: 2563 Oak Gove Ch Rd
City: Angier State: NC Zip: 27501 Contact No: 919-669-7066 Email: Trw/mberly og mod. com
APPLICANT : Tony Wimberly Mailing Address: 2563 Ogh Grove Child
City: Angly State: NC Zip: 2750 Contact No: 914-669-7066 Email: Two mboly & great 1.com
ADDRESS: LO+ 6, Turner Trace In, Conts PIN: 0(90-60-6407.000
ADDRESS: (0+ 6, Turner Trace In, Conts PIN: 0(090-600-6407-000
DEED OR OTP: 31043/917
PROPOSED USE:
SFD: (Size 30 x 50) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Monolithic Slab: Garage: Deck: Crawl Space: Slab: Slab: Slab: Slab: Garage: Deck: Crawl Space: Slab: Slab: Garage: Garage: Deck: Crawl Space: Slab: Slab: Slab: Slab: Garage: Crawl Space: Slab: Slab: Slab: Slab: Garage: Garage: Crawl Space: Slab: Slab: Garage: Garage: Crawl Space: Slab: Slab: Slab: Garage:
☐ Mod: (Sizex) # 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: (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
Town made
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 (X) no
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
Signature of Owner's Agent  Signature of Owner's Agent  This 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

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## \*\*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" SEPTIC If applying (or authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. { } Accepted { } Innovative { } Conventional { } Any { } Alternativ } 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: { } NO Does the site contain any Jurisdictional Wetlands? { }YES Dowou plan to have an irrigation system now or in the future? { }YES { } NO { } NO { }YES 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? Is the site subject to approval by any other Public Agency? { }YES { } NO { } NO Are there any Easements or Right of Ways on this property? { }YES { }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.

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# ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. This form along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 12-3-14-1 Date: 12/3/18 Fee: \$50
Parcel ID*:0706 9015250068 05 Area Zoned As: R20
APPLICANT: PROPERTY OWNER:
Name (Print) Tony Wimberly Name Winberly Investments La
Address 2543 Oah Grove Ch Rd Address 2563 Oah Grave Ch dr
City, State Angice NC 27801 City, State Angice NC
Zip Code 27501 Zip Code 27501
Phone # 919 - 669 - 7066 Phone # 919-669 - 7064
Location of Property: IN-TOWN ETJ ETJ (contiguous)
Present Use of Property:
PROPOSED USE OF PROPERTY:
Square Feet:  Square Feet:  Multi Family Dwelling: # of Units: #Bedrooms (per unit): Square Feet (per unit)  Mobile Home (single lot): Single wide: Double Wide:  Mobile Home Park: Section 16, Zoning Ordinance must apply  Business: Total # of employees per day  Type of business  Others (specify):
[ ] Existing structure: Renovate: Addition: Demolish:
WATER AND SEWER SUPPLY:
Water: [ ] Private [ ] Public [ ] Proposed [ ] Existing Sewer: [ ] Private [ ] Public [ ] Proposed [ ] Existing
Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.
Signature: 12 12 12 12 12 12 12 12 12 12 12 12 12
ZONING ADMINISTRATOR USE ONLY
Notes: TOWN OF COATS ZONING
Approved: [✓] Denied: [ ]
Zoning Administrator: 12-3-18 Date: 12-3-18
THIS PERMIT IS VALID FOR 12 MONTHS