

Initial Application Date: 3-7-19

Application # SFD1903-0007

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: David & Gail Carter Mailing Address: 309 Old NC 87
City: Cameron State: NC Zip: 28326 Contact No: 919) 906-4069 Email: southernconcrete@windstream.net

APPLICANT*: Steve Thomas Mailing Address: P O Box 875
City: Broadway State: NC Zip: 27508 Contact No: 919) 906-4069 Email: southernconcrete@windstream.net
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Steve Thomas Phone # 919) 906-4069

PROPERTY LOCATION: Subdivision: 367 Old NC 87 Lot #: _____ Lot Size: 1.5 acre

State Road # _____ State Road Name: _____ Map Book & Page: _____ / _____

Parcel: _____ PIN: 9576-44-2900.000

Zoning: R200R Flood Zone: NO Watershed: NO Deed Book & Page: 3602 / 0857 Power Company*: Duke Energy

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

SFD: (Size 60 x 70) # Bedrooms: 3 # Baths: 2 Basement (w/wo bath): _____ Garage: Deck: _____ Crawl 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

Sewage Supply: 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 () no

Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): Single family dwellings: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front Minimum 35 Actual 105

Rear 25 90

Closest Side 10 68

Sidestreet/corner lot _____

Nearest Building on same lot _____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take Highway 27 West, turn
left onto Old NC 87. Lot on right

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.

Jim Johns
Signature of Owner or Owner's Agent

3-6-2019
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

NAME: _____

APPLICATION #: SFD1903-0007

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 System Code 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 **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.**
- 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. **Please note 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.**
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

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.

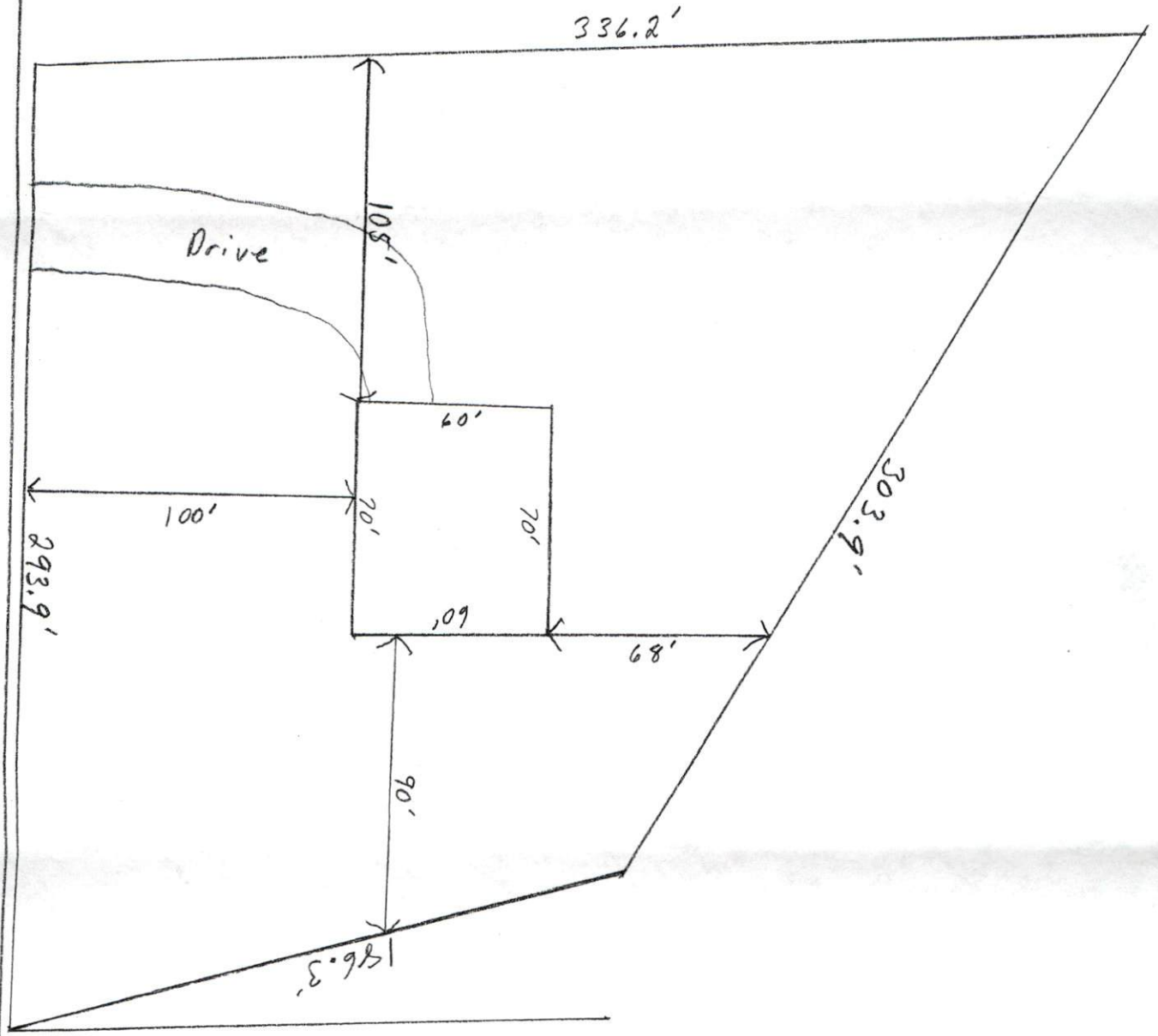
I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Jim Jones

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

3-6-2019
DATE

OLD NC 87



SITE PLAN APPROVAL

DISTRICT RA 2012 USE SFD

#BEDROOMS 3

3-7-19

[Signature]

3-7-19 *Paul Carter*

ADMINISTRATOR

Print this page



Property Description:
1.50ACS DOUGLAS LAND

Harnett County GIS

PID: 03958601 0049

PIN: 9576-44-2900.000

REID: 0001557

Subdivision:

Taxable Acreage: 1.500 AC ac

Cacluated Acreage: 1.69 ac

Account Number: 1500027192

Owners: CARTER GAIL BAKER & CARTER STANLEY DAVID

Owner Address : 309 OLD NC 87 CAMERON, NC 28326-8906

Property Address: 367 OLD NC 87 CAMERON, NC 28326

City, State, Zip: CAMERON, NC, 28326

Building Count: 1

Township Code: 03

Fire Tax District: Spout Springs

Parcel Building Value: \$4370

Parcel Outbuilding Value : \$1000

Parcel Land Value : \$21800

Parcel Special Land Value : \$0

Total Value : \$27170

Parcel Deferred Value : \$0

Total Assessed Value : \$27170

Neighborhood: 00304

Actual Year Built: 1961

TotalAcutalAreaHeated: 1240 Sq/Ft

Sale Month and Year: 5 / 2018

Sale Price: \$0

Deed Book & Page: 3602-0857

Deed Date: 2018/05/07

Plat Book & Page: -

Instrument Type: WD

Vacant or Improved:

QualifiedCode: C

Transfer or Split: T

Within 1mi of Agriculture District: No

Prior Building Value: \$4210

Prior Outbuilding Value : \$1000

Prior Land Value : \$20500

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$25710

