

Initial Application Date:			Application #					
Central Permitti	ng 108 F Fron	COUNTY t Street, Lillin		ETT RESIDENTIAL LAND 546 Phone: (910) 893		ATION	www.harnett.org/permits	
				TO PURCHASE) & SITE PLAN				
	,		`	,				
City:		State:	Zip:	Contact No:		Email:		
APPLICANT*: Mailing Address:								
City:*Please fill out applicant				Contact No:		Email:		
CONTACT NAME A	PPLYING IN OFFIC	E:			P	hone #		
ADDRESS:				PIN:				
DEED OR OTP:								
PROPOSED USE:								
□ SFD: (Size	•			ement(w/wo bath): Gres () no w/ a closet?	_			
☐ Mod: (Size				ement (w/wo bath) G /es() no Any other s	-		Frame Off Frame	
☐ Manufactured H	lome:SWI	OWTW (Size	x) # Bedrooms:	Garage:	_(site built?) Deck:	(site built?)	
□ Duplex: (Size _	x) No. Bu	uildings:		_ No. Bedrooms Per Unit:				
☐ Home Occupati	on: # Rooms:	U:	se:	Hours of	Operation:		#Employees:	
□ Addition/Access	ory/Other: (Size	x) l	Jse:			Closets in a	ddition? () yes () no	
Water Supply: X		cisting Well	New \	Nell (# of dwellings using	well	*Must have operable	water before final	
Sewage Supply:			sion Re		ptic Tank		nk)	
(Con Does owner of this tr	<mark>iplete Environmenta</mark> act of land, own lan	<mark>il Health Che</mark> id that contain	<mark>cklist on othe</mark> is a manufac	<mark>er side of application if Se</mark> ctured home within five hu	<mark>:ptic)</mark> ındred feet (500	') of tract listed above?	() yes () no	
Does the property co	ntain any easemen	ts whether un	derground o	or overhead ($\overline{\underline{X}}$) yes (_) no			
Structures (existing of	or proposed): Single	family dwellii	ngs:	Manufactured	Homes:	Other (spe	cify):	
							pecifications of plans submitted te information is provided.	
-		re of Owner				Date		
	plicants responsi	bility to prov	ide the cou	nty with any applicable			erty, including but not limited e 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 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

- <u>All property irons must be made visible</u>. 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

Accessible So That A Complete Site Evaluation Can Be Performed.

CEDETA

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

<u>SEPTIC</u>						
If applying	for authorizati	ation to construct please indicate desired system type(s): can be ranked in	order of preference, must choose one.			
{}} Accepted		{}} Innovative {\begin{cases}{\Delta}\} Conventional {}} Any				
{}} Alternative		{}} Other				
		ify the local health department upon submittal of this application if any is "yes", applicant MUST ATTACH SUPPORTING DOCUMENT				
{}}YES	{X} NO	Does the site contain any Jurisdictional Wetlands?				
{}}YES	{X} NO	Do you plan to have an <u>irrigation system</u> now or in the future?				
$\{\underline{X}\}$ YES $\{\underline{X}\}$ YES	{ <mark>X</mark> } NO	Does or will the building contain any drains? Please explain				
$\{X\}$ YES	{}} NO	Are there any existing wells, springs, waterlines or Wastewater Sy	stems on this property? (see plat)			
{}}YES	{ <mark>X</mark> } №	Is any wastewater going to be generated on the site other than dom	· · · · · · · · · · · · · · · · · · ·			
{}}YES	{ X } №	Is the site subject to approval by any other Public Agency?				
$\{X\}$ YES	{}} NO	Are there any Easements or Right of Ways on this property? (See plat)				
$\{X\}$ YES	{}} NO	Does the site contain any existing water, cable, phone or underground	/			
		If yes please call No Cuts at 800-632-4949 to locate the lines. Th	is is a free service.			

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I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State

Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site

Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I