

| Init: Application Date: | Application # |
|--|---|
| COUNTY OF F | HARNETT RESIDENTIAL LAND USE APPLICATION |
| g and a state of the state of t | NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits |
| | OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION™ |
| LANDOWNER DESUS Macias Leon | Mailing Address: 6400 Touch stone Dr |
| | 28311 Contact No: 910 920 85/2 Email: Chay 197614 @ yahow Com |
| APPLICANT : SAME | Mailing Address: |
| City: State: Zip: | Contact No: Email: |
| ADDRESS: 61 Thorntons Greek Dr. Grw. | NAC 28339 PIN: 0588-39-8026-000 |
| Zoning:Flood:Watershed: | Deed Book / Page: |
| Setbacks - Front: Back: Sid | |
| PROPOSED USE: | |
| | Basement(w/wo bath):Garage:Deck:Crawl Space:Slab:) yes () no w/ a closet? () yes () no (if yes add in with # bedrooms) |
| | Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame) 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 |
| Water Supply: County X _ Existing Well New | w Well (# of dwellings using well) *Must have operable water before final |
| Sewage Supply: New Septic Tank Expansion (Complete Environmental Health Checklist on of | ed to Complete New Well Application at the same time as New Tank) RelocationExisting Septic Tank County Sewer ther side of application if Septic) |
| Does owner of this tract of land, own land that contains a manuf | factured home within five hundred feet (500') of tract listed above? () yes () no |
| Does the property contain any easements whether underground | or overhead () yes (X) no |
| Structures (existing or proposed): Single family dwellings: | Manufactured Homes: Other (specify): |
| hereby state that foregoing statements are accurate and correct | aws of the State of North Carolina regulating such work and the specifications of plans submitted. It to the best of my knowledge. Permit subject to revocation if false information is provided. |
| W. Elaney | 8-5-2020 |

Signature of Owner or Owner's Agent

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

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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

- 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 authorizat | ion to construct please ind | licate desired system type(s): | can be ranked in order of | f preference, must choose one. | | |
| { Accepted | { Y } Innovative | (1) Conventional | { (} Any | | | |
| | | | | | | |
| The applicant shall notify question. If the answer is | y the local health departn s "yes", applicant MUST | nent upon submittal of this a ATTACH SUPPORTING | application if any of the G DOCUMENTATIO | following apply to the property in N: | | |
| { }YES {★} NO | Does the site contain a | my Jurisdictional Wetlands? | | | | |
| { }YES { X } NO | Do you plan to have an <u>irrigation system</u> now or in the future? | | | | | |
| { X}YES { } NO | Does or will the building contain any drains? Please explain. House drains | | | | | |
| { }YES { } NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? | | | | | |
| { }YES {X} 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 {X} NO | Are there any Easements or Right of Ways on this property? Does the site contain any existing water, cable, phone or underground electric lines? County water Tap | | | | | |
| { X } YES { _ } NO | Does the site contain a | ny existing water, cable, ph | one or underground ele | ctric lines? County water lap | | |
| | If yes please call No | Cuts at 800-632-4949 to loca | ate the lines. This is a f | ree service. | | |
| | | | | d Correct. Authorized County And State | | |
| Officials Are Granted Rig | ht Of Entry To Conduct ! | Necessary Inspections To Det | ermine Compliance Wit | Applicable Laws And Rules. I | | |
| Understand That I Am So | olely Responsible For The | Proper Identification And La | abeling Of All Property l | ines And Corners And Making The Site | | |
| A ILI- Co That A Con | anlete Site Evaluation Car | Re Performed | | | | |

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