

Initial Application Date: 07/14/20	Application #
	CU# TT RESIDENTIAL LAND USE APPLICATION 546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO	O PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION*
LANDOWNER: Paul A. Lyon	Mailing Address: 350 Wagoner Dr
City: Fayetteville State: NC Zip: 283	Mailing Address: 350 Wagoner Dr O3 Contact No: 919-410-5473 Email: samantha@weavercompanies.com
APPLICANT*: Weaver Homes, Inc Mailing	Address: 000 Wagorier DI
City: Fayetteville State: NO Zip: 2001 *Please fill out applicant information if different than landowner	03 Contact No: 9194105473 Email: samantha@weavercompanies.com
ADDRESS: 15 Roberts Rd Sanford, NC 27332	
Zoning: RA-20R Flood: Min. Watershed: NO	
Setbacks - Front: 39 Back: 105 Side: 3	
PROPOSED USE:	
	ment(w/wo bath):Garage; Deck: Crawl Space: Slab: Slab:
(Is the bonus room finished? () yes	s () no w/ a closet? () yes () no (if yes add in with # bedrooms)
	ment (w/wo bath) Garage: Site Built Deck: On Frame Off Frame s () no Any other site built additions? () yes () no
☐ Manufactured Home: _SW _DW _TW (Sizex)# 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
Sewage Supply: X New Septic Tank Expansion Relo	ell (# of dwellings using well
Does the property contain any easements whether underground or o	
Structures (existing or proposed): Single family dwellings:X_	P Manufactured Homes: Other (specify):
I hereby state that foregoing statements are accurate and correct to	of the State of North Carolina regulating such work and the specifications of plans submitted the best of my knowledge. Permit subject to revocation if false information is provided. $\frac{1}{2} \frac{14}{20}$
to: boundary information, nouse location, underground or a missing information.	Agent y with any applicable information about the subject property, including but not limited overhead easements, etc. The county on its employees are not responsible for any ation, that is contained within these applications ***. In from the initial date if permits have not been issued.**

APPLICATION CONTINUES ON BACK

strong roots · new growth



This application expires 5 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 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 comers 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 matthe required to complete any dispection"
<u>SEPTIC</u>	
If applying for auth	orization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{×} Accepted	{ } Innovative { X} Conventional { } Any
{ } Alternative	{ } Other
The applicant shall question. If the ans	notify the local health department upon submittal of this application if any of the following apply to the property in wer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{ }YES {\mathcal{N}} N	O Does the site contain any Jurisdictional Wetlands?
{ }YES {\mathcal{P}} N	IO Do you plan to have an <u>irrigation system</u> now or in the future?
{ }YES $\{Y\}$ N	IO Does or will the building contain any drains? Please explain.
{ }YES {\$\mathbb{V}_{\mathbb{I}}}	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{ }YES {\omegas N	IO Is any wastewater going to be generated on the site other than domestic sewage?
{ }YES {\mathcal{O}} N	O Is the site subject to approval by any other Public Agency?
{ }YES {Q } N	O Are there any Easements or Right of Ways on this property?
{ }YES {⊘ } N	O 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,
	plication And Certify That The Information Provided Herein Is True, Complete And Correct: Authorized County And State
	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I
	m Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site
Accessible So That A	Complete Site 142 marton Can Re Portormed

strong roots · new growth