

Initial Application Date:		Applie	cation #	
			CU#	
Central Permitting 108 E. Front St	COUNTY OF HARNETT RESID reet, Lillington, NC 27546 Ph	DENTIAL LAND USE APPLICA none: (910) 893-7525 ext:2		www.harnett.org/permits
**A RECORDED SURVEY MAP, RECOR	RDED DEED (OR OFFER TO PURCHA	SE) & SITE PLAN ARE REQUIRED W	HEN SUBMITTING A LAN	ND USE APPLICATION**
LANDOWNER: Wellco Contractors Inc Mailing Address: PO Box 766				
City: Spring Lake	State: NC Zip: 28390 Cont	act No: 910-263-0276	Email:	WELLONSREALTY.COM
APPLICANT*: Same as above	Mailing Address	:		
City: S	State: Zip: Cont			
*Please fill out applicant information if different tha		0506 43 6888 0	00	
ADDRESS: Lot 105 Rolling Springs Doc				
Zoning: RA20R Flood: N/A				
Setbacks – Front: Back: 25'	Side: Corner:			
PROPOSED USE:				
□ SFD: (Size <u>50</u> x <u>50</u> ) # Bedrooms	: 4 # Baths: 2.5 Basement(w/w	o bath): Garage: Dec	k: Crawl Space:_	Monolithic Slab:
TOTAL HTD SQ FT GARAGE SQ FT	(Is the bonus room finish	ned? () yes () no w/ a clos	set? () yes () no	(if yes add in with # bedrooms)
5				
☐ Modular: (Sizex) # Bedroo TOTAL HTD SQ FT				
TO THE OUT I	(13 the second noor inhance:	(	site built additions: (	
☐ Manufactured Home:SWDW	TW (Sizex) #	# Bedrooms: Garage:(	site built?) Deck:_	(site built?)
□ Duplex: (Sizex) No. Buildi	ngs: No. Bedro	ooms Per Unit:	TOTAL HTD S	QFT
☐ Home Occupation: # Rooms:	Use:	Hours of Operation:		#Employees:
□ Addition/Accessory/Other: (Size	x ) Use:		Closets in a	ddition?( ) ves ( ) no
	ARAGE			
J. Contracting Services				
Water Supply: X County Existing	ng Well New Well (# of c	dwellings using well)	*Must have operable	water before final
Sewage Supply: X New Septic Tank	Need to Comple Expansion Relocation_	ete New Well Application at the s Existing Septic Tank (	<mark>same time as New Tar</mark> County Sewer	n <mark>k</mark> )
(Complete Environmental He Does owner of this tract of land, own land th	ealth Checklist on other side of a	application if Septic)		
Does the property contain any easements w				
Structures (existing or proposed): Single fam	•		Other (spec	nifi/)·
If permits are granted I agree to conform to a I hereby state that foregoing statements are				
	of Owner's Agent	/-	28-21 Date	
Signature	of Owner or Owner's Agent	ny applicable information abo		rty including but not limited
***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.***				
	rect or missing information the ication expires 6 months from			

APPLICATION CONTINUES ON BACK

strong roots · new growth



#### \*\*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)

## <u>Environmental Health New Septic System</u>

- <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

SEPTIC

#### "MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
{}} Acce	pted	$\{\underline{\ }\}$ Innovative $\{\underline{\ }X\}$ Conventional $\{\underline{\ }\}$ Any		
{}} Alter	native	{}} 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 <b>MUST ATTACH SUPPORTING DOCUMENTATION</b> :				
{}}YES	{ <u>x</u> _}} NO	Does the site contain any Jurisdictional Wetlands?		
{_}}YES	{ <u>x</u> } №	Do you plan to have an <u>irrigation system</u> now or in the future?		
{}}YES	{ <u>x</u> } №	Does or will the building contain any drains? Please explain.		
{}}YES	{ <u>X</u> } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?		
{}}YES	{ <u>X_</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?		
{}}YES	{ <u>x</u> _}} NO	Is the site subject to approval by any other Public Agency?		
{}}YES	{ <u>x</u> } NO	Are there any Easements or Right of Ways on this property?		
{}}YES	{ <u>x</u> } №	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.

## Print this page



# **Property Description:**

LT#105 ROLLING SPGS SEC 7MAP#23-



PID: 010505 0200 57

PIN: 0506-43-6888.000

REID: 0056561

Subdivision:

Taxable Acreage: 1.000 LT ac

Caclulated Acreage: 0.62 ac

Account Number: 101453000

Owners: WELLCO CONTRACTORS INC

Owner Address: P O BOX 766 SPRING LAKE, NC 28390-0000

Property Address: DOCS RD SPRING LAKE, NC 28390

City, State, Zip: SPRING LAKE, NC, 28390

Building Count: 0

Township Code: 01

Fire Tax District: Anderson Creek

Parcel Building Value: \$

Parcel Outbuilding Value: \$

Parcel Land Value: \$

Parcel Special Land Value: \$

Total Value: \$

Parcel Deferred Value: \$

Total Assessed Value: \$

Neighborhood: 00107

**Actual Year Built:** 

TotalAcutalAreaHeated: Sq/Ft

Sale Month and Year: 8 / 1988

Sale Price: \$0

**Deed Book & Page:** 863-0792

Deed Date: 587260800000

Plat Book & Page: 23-14

Instrument Type: WD

Vacant or Improved:

QualifiedCode: E

Transfer or Split: S

Within 1mi of Agriculture District: No

Prior Building Value: \$

Prior Outbuilding Value: \$

Prior Land Value: \$

Prior Special Land Value: \$

Prior Deferred Value: \$

Prior Assessed Value: \$

•

Generating Map...