

Initial Application Date:						
Application#						
Country of Harnett Residential Land use Application						
States, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/permits						
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**						
DA PON 2005						
City: Lillington State: NC Zip: 27546 Contact No. 910-528-6522 Email: jortay lorreal typychoo.com						
APPLICANT: Jonathan Taylor						
APPLICANT: Mailing Address: City: State: Zip: Contact No: Email:						
ADDRESCO FI 20 S II O S ADDRESCO FI 20						
ADDRESS: 5675 South River Rd. Lillington PIN: 0631-16-1524.000						
Zoning: RA30 Flood: MTN Watershed: N Deed Book / Page: 3850:0870						
Setbacks - Front: 190 Back: 250 Side: 25 Corner:						
PROPOSED USE:						
SFD: (Sizex) # Bedrooms:# Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:						
Modular: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame TOTAL HTD SQ FT (Is the second floor finished? () yes () no Any other site built additions? () yes () no						
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)						
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit TOTAL HTD SQ FT TOTAL HTD SQ FT						
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:						
Addition/Accessory/Other: (Size 48x 30) Use: Det. Garage Wapartment Abuveclosets in addition Syes one TOTAL HTD SO FT 600 GARAGE 1200 814 T 1 Bed / 1 Bath Slab munu)						
Water Supply:County Existing Well New Well (# of dwellings using well) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)						
Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer (Complete Environmental Health Checklist on other side of application if Sertic)						
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 (
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify): 1 Det. Garage						
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.						
Signature of Owner's Agent Date						
Signature of 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

strong roots · new growth



This application expires 6 months from the initial date if permits have not been issued

County Health Department Application for Improvement Appli C

OR AUT	HORIZATION T tation submitted	IN THIS APPLICATION I O CONSTRUCT SHALL I (Complete site plan = 60 n	S FALSIFIED, CHANGED, OF BECOME INVALID. The permonths; Complete plat = without	RENT Permit and/or Authorization to Construct R THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIN it is valid for either 60 months or without expiration depending upon texpiration)	Ton	
. <u>En</u>	 All property irons must be made visible. Place "pink property flags" on each comer iron of lot. All property lines must be clearly flagged approximately every 50 feet between comers. Place "orange house comer flags" at each comer 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. On not a undergrowth to allow the soil evaluation. 					
•	 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 sentic tank in a mobile home park) 					
} A	ng for authorizati	ion to construct please ind				
he appl uestion.	If the answer is	the local health departn		application if any of the following apply to the property in		
_}YES	(√) NO (√) NO	Do you plan to have ar	my Jurisdictional Wetlands?	n the future?		

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

Does the site contain any existing water, cable, phone or underground electric lines?

Are there any existing wells, springs, waterlines or Wastewater Systems on this property?

Is any wastewater going to be generated on the site other than domestic sewage?

Is the site subject to approval by any other Public Agency?

Are there any Easements or Right of Ways on this property?

Accessible So That A Complete Site Evaluation Can Be Performed.

{ ✓} NO

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{ }YES

{ }YES