

Initial Application Date: 1-5-22

Application #	

					CU#	
Central Permitting 108	COUNTY OF H E. Front Street, Lillington, N		DENTIAL LAND USE APP hone: (910) 893-7525 ext:2	The state of the s	3-2793 www.harnett	.org/permits
	MAP, RECORDED DEED (OR O	SEEER TO PURCH	ASE) & SITE PLAN ARE REQUI	RED WHEN SUBMIT	TING A LAND USE APPLIC	ATION**
	A /	/				and the second
ANDOWNER: Jordan	& Payton to	-XTON	Mailing Address: 380	Minsmen	101 01	-1.
city: Fuguery Varino	, / /				1	el, Can
APPLICANT : Triang	gle Hanckros	Mailing Addres	s: 63/2 Lav	raca la	1././	
City: Fugury Va	1 ~9 State: NC Zip	21576 con	ntact No: 9/9-39	6-15 Email:	HI Homeso	Comal. Com
ADDRESS: 88 Pri	scilla LN		PIN: 0645-	-60-017	00	
Zoning: PA-30 Flood: M	1. ~ Watershed: '	Deed E	Book / Page: 10/6/20	1= 4057-	346	
Setbacks - Front: 94 Ba	ck: 100 + Side: 29	Corner:_/	A			
PROPOSED USE:				20 4 10 10 10 10		Monolithic
SFD: (Size 80 x 58)					Space: X Slab:	Slab:
TOTAL HTD SQ FT 2794 GAR	AGE SQ FT(Is the I	bonus room fini	shed? () yes (\swarrow) no wi	a closet? () yes	() no (if yes add in	with # bedrooms)
Modular: (Sizex	_) # Bedrooms # Bath	s Basemen	t (w/wo bath) Garage:	Site Built Dec	ck: On Frame	_ Off Frame
TOTAL HTD SQ FT	(Is the secon	nd floor finished	? () yes () no Any (other site built add	tions? () yes () n	0
Manufactured Home:S	SWDWTW (Size_	x	# Bedrooms: Garage	:(site built?) Deck:(site built?	<u></u>)
Duplex: (Sizex) No. Buildings:	No. Bed	Irooms Per Unit:	non	LIHTD SQ FT	
Home Occupation: # Room	s: Use:		Hours of Operation:		#Employed	es:
Addition/Accessory/Other:	(Sizex) Use:			Cl	osets in addition? ()	yes () no
TOTAL HTD SQ.FT	GARAGE				= 1	
			= 3			
Water Supply:County _	Existing Well	New Well (# of	dwellings using well) *Must have	operable water before	final
Sewage Supply: New Sep	otic Tank Expansion	Relocation	Existing Septic Tank	County Sew	er	
Does owner of this tract of land,	onmental Health Checklist own land that contains a m	nanufactured ho	me within five hundred feet	(500') of tract liste	d above? () yes (2	Tno
Does the property contain any e	asements whether undergr	ound or overhe	ad (Yyes (_) no			
Structures (existing or proposed): Single family dwellings:_	1	Manufactured Homes:		other (specify):	
If permits are granted I agree to I hereby state that foregoing sta	conform to all ordinances a	and laws of the correct to the be	State of North Carolina reg est of my knowledge. Permi	it subject to revoca	tion if false information	f plans submitted. is provided.
J.	11/1/			1/2/2020	2	
***It is the owner/applicants r	Signature of Owner or O	wner's Agent	any applicable information	Date		g but not limited
to: boundary information	, house location, undergreincorrect or missing	ound or overh	ead easements, etc. The c that is contained within th	county or its emp lese applications	loyees are not respon	sible for any
36	*This application expires	s 6 months from	m the initial date if permit	s have not been	ssued**	

APPLICATION CONTINUES ON BACK

strong roots · new growth

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 40/N to Ra Left TO Hectofs Creek Then Right to Then Left to 88.	Priscilla LN
Than capt to 88.	
f permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and hereby state that foregoing statements are confect to the best of my knowledge. Permit subject to revocation	d the specifications of plans submitte n if false information is provided.
details to the second billion to according to the country with any analizable information about the cubics	

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



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 inspect on.

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 PER OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending a documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)	MIT
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 be clearly flagged approximately every 50 feet between corners. 	must
 Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, deck buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. 	s, out
 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 eval to be performed. Inspectors should be able to walk freely around site. Do not grade property. 	uation
 All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready. 	ed for
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 post 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 	ssible)
"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"	
SEPTIC If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
{∑} Accepted {_}} Innovative {}} Conventional {}} Any	
{_}} Alternative {} 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 MUST ATTACH SUPPORTING DOCUMENTATION:	

1× NO { }YES Does the site contain any Jurisdictional Wetlands? INO {_}}YES Do you plan to have an irrigation system now or in the future? 1X NO { }YES Does or will the building contain any drains? Please explain. 1 X NO { }YES 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 KINO Is the site subject to approval by any other Public Agency? 1) NO Are there any Easements or Right of Ways on this property? YES YES { } NO 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.