

Initial Application Date: 2/14/22

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***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**
Susan Rodriguez Signature of Owner or Owner's Agent Date
f 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. hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
Does the property contain any easements whether underground or overhead (X) yes () no
Water Supply: X 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: X New Septic Tank Expansion Relocation Existing Septic Tank County Sewer (Complete Environmental Health Checklist on other side of application if Septic) Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes (_X) no
TOTAL HTD SQ FT GARAGE
Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () no
□ Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
☐ Manufactured Home: SW DW TW (Size x) # Bedrooms: Garage: (site built?) Deck: (site built?)
x) # 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
Monolithic SFD: (Size 3 1 434 Bedrooms: 3 # Baths: 2.5Basement(w/wo bath): X Garage: Deck: Crawl Space: Slab: X Slab: TOTAL HTD SQ FT 1434 GARAGE SQ FT _393 (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
PROPOSED USE:
Setbacks - Front: 45' Back: 209'.50"Side: 42 55 Corner: 20'.0"
Zoning: RA-20 Flood: MIN Watershed: Deed Book / Page: 4100/527 LOT
*Please fill out applicant information if different than landowner 1218 Haye 526. ADDRESS: TBD HAYES RD., SPRING LAKE NC 28390 PIN: PART OF 0524-87-7885.000 OSZY - 88-733
City: Fayetteville State: NC Zip 28303 Contact No: 910 630 2100 ext 204 Email: Susan@weaver-homes.com
APPLICANT*: Weaver Homes Inc. Mailing Address: 350 Wagoner Dr
City: FAYETTEVILLE State NC Zip: 28303 Contact No: 910-630-2100 EXT 204 Email: SUSAN@WEAVER-HOMES.COM
LANDOWNER: Land 2020 INC. Mailing Address: 350 WAGONER DR
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

APPLICATION CONTINUES ON BACK

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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)

□ 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 <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

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

SEPTIC If applying	for authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.			
{}} Accepted		[_] Innovative [_] Conventional {\(\sum_{\text{Any}} \)			
{}} Alte	mative	{}} 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:					
{_}}YES	(YNO	Does the site contain any Jurisdictional Wetlands?			
{}}YES	L'Y NO	Do you plan to have an irrigation system now or in the future?			
{}}YES	(V NO	Does or will the building contain any drains? Please explain			
{}}YES	{_ √ } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?			
{}}YES	NO 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	{}} NO	Are there any Easements or Right of Ways on this property?			
{_}}YES	(_INO	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.

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