



Initial Application Date: \_\_\_\_\_

Application # \_\_\_\_\_

CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\*

LANDOWNER: Van C. & Sandra P. Frizzelle Mailing Address: 56 Dove Trail

City: Sanford State: NC Zip: 27332 Contact No: 910-850-1286 Email: vcfrizzelle64@outlook.com

APPLICANT\*: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

ADDRESS: Lot 19 Quail Creek Farms PIN: 9586-28-8579.000

Zoning: RA-20R Flood: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book / Page: 2381-0396

Setbacks - Front: 460 Back: 100 Side: 320 Corner: \_\_\_\_\_

PROPOSED USE:

[X] SFD: (Size 61 x 46) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): 0 Garage: [X] Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: [X] Monolithic Slab: \_\_\_\_\_
TOTAL HTD SQ FT 1700 GARAGE SQ FT 484 (Is the bonus room finished? ( ) yes (X) no w/ a closet? ( ) yes ( ) no (if yes add in with # bedrooms)

[ ] Modular: (Size \_\_\_\_\_ 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

[ ] Manufactured Home: \_\_\_\_\_ SW \_\_\_\_\_ DW \_\_\_\_\_ TW (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ Garage: \_\_\_\_\_ (site built? \_\_\_\_\_) Deck: \_\_\_\_\_ (site built? \_\_\_\_\_)

[ ] Duplex: (Size \_\_\_\_\_ x \_\_\_\_\_) No. Buildings: \_\_\_\_\_ No. Bedrooms Per Unit: \_\_\_\_\_ TOTAL HTD SQ FT \_\_\_\_\_

[ ] Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: \_\_\_\_\_

[ ] Addition/Accessory/Other: (Size \_\_\_\_\_ x \_\_\_\_\_) Use: \_\_\_\_\_ Closets in addition? ( ) yes ( ) no
TOTAL HTD SQ FT \_\_\_\_\_ GARAGE \_\_\_\_\_

Water Supply: \_\_\_\_\_ County \_\_\_\_\_ Existing Well \_\_\_\_\_ New Well (# of dwellings using well (1)) \*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

Does the property contain any easements whether underground or overhead (X) yes ( ) no

Structures (existing or proposed): Single family dwellings: [X] Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

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 or Owner's Agent: Van C. Frizzelle + Sandra Frizzelle Date: 2/18/22

\*\*\*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\*\***

**\*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 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 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**:

- { } YES    {  } NO    Does the site contain any Jurisdictional Wetlands?
- { } YES    {  } NO    Do you plan to have an irrigation system now or in the future?
- { } YES    {  } 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    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    {  } 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.**

MELVIN A. GRAHAM, CERTIFY THAT THIS PLAN WAS DRAWN UNDER MY SUPERVISION AND THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT. I HAVE REVIEWED THE SURVEY AND THE INFORMATION CONTAINED THEREIN AND I AM SURE THAT THE BOUNDARIES SHOWN ARE CLEARLY INDICATED AS DRAWN FROM INFORMATION FOUND IN BOOK 2381, PAGE 396; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY AS CALCULATED IS 1:100,000; THAT THIS PLAN WAS PREPARED ACCORDING TO THE REQUIREMENTS OF THE PROFESSIONAL SURVEYING ACT, LICENSE NUMBER AND SEAL THIS 27 DAY OF APRIL, A.D. 2021.

MELVIN A. GRAHAM, P.L.S. REGISTRATION NUMBER L-3471

NOTE: THIS SURVEY IS OF ANOTHER CATEGORY SUCH AS THIS SURVEY OF AN EXISTING PARCEL AS A CONDITION OF SUBDIVISION OR OTHER EXCEPTION TO THE DEFINITION OF SUBDIVISION.  
SURVEYOR

STATE OF NORTH CAROLINA  
COUNTY OF HARNETT  
CERTIFY THAT THE MAP OR PLAN TO WHICH THIS CERTIFICATION REFERS MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.  
DATE REVIEW OFFICER

NOTE: THIS PROPERTY IS SUBJECT TO ANY AND ALL EASEMENTS, RIGHTS AND AGREEMENTS OF RECORD PRIOR TO THIS PLAN.

LOT 19 = 4.76 AC.  
LOT 19-A = 0.48 AC.  
TOTAL AREA = 5.24 AC.

NOTES:  
LOT 19 CONSIST OF ALL OF THE VAN C. FRIZZELLE and SANDRA P. FRIZZELLE PROPERTY AS RECORDED IN D.B. 2381, PG. 396 HARNETT COUNTY REGISTRY  
LOT 19-A CONSIST OF A PORTION OF THE BENITA C. FRIZZELLE PROPERTY AS RECORDED IN D.B. 2431, PG. 233 HARNETT COUNTY REGISTRY.  
LOTS 19 & 19-A TO BE COMBINED AND NOT TO BE USED AS SEPARATE BUILDING LOTS.  
ALL AREAS BY COORDINATE METHOD  
COUNTY WATER  
PRIVATE SEPTIC SYSTEM

NOTE: 78.86 AC. REMAINING IN TRACT BY TAX RECORDS.  
BENITA C. FRIZZELLE  
D.B. 2431, PG. 233

LOT 19  
PID # 039586 0055  
PIN # 9586-28-8579.000  
REID # 0011253

LOT 19-A  
PID # 039589 1043.04  
PIN # 9586-27-8400.000  
REID # 0011259

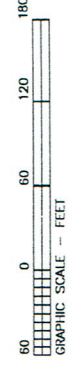
TOWNSHIP	COUNTY	STATE
BARBEQUE	HARNETT	NC

OWNER: LOT 19	DATE:
VAN C. FRIZZELLE SANDRA P. FRIZZELLE 56 DOVE TRAIL SANFORD, NC 27332	04/26/2021

OWNER: LOT 19-A	SCALE:
BENITA C. FRIZZELLE 123 JAMISON, NC 27440	1" = 60'

REVISOR:	NO. PROPOSED DWELLING
MELVIN A. GRAHAM, P.L.S. 5679 NICHOLSON ROAD CAMERON, NC 28326 PHONE (919) 499-6174	6821

NORTH CAROLINA HARNETT COUNTY  
PREPARED FOR SUBMISSION ON THE DAY  
OF \_\_\_\_\_ 20\_\_\_\_ AT \_\_\_\_\_  
RECORDED AT MAP NUMBER \_\_\_\_\_  
REGISTERED AS MAP NUMBER \_\_\_\_\_



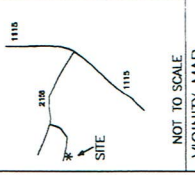
CERTIFICATE OF OWNERSHIP, DEDICATION AND JURISDICTION  
I (WE) HEREBY CERTIFY THAT I AM (WE ARE) THE OWNER(S) OF AGENT OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND MAY (WE MAY) THE CONSIST OF ESTABLISH THE MINIMAL BUILDING SETBACK LINES AND DEDICATE ALL STREETS, ALLEYS OR RIGHTS-OF-WAY AND EASEMENTS AND EASEMENTS SHOWN HEREON TO THE SUBDIVISION REGULATION JURISDICTION OF HARNETT COUNTY EXCEPT: \_\_\_\_\_ TAX PARCEL ID NUMBER \_\_\_\_\_

OWNER  
OWNER  
OWNER

JACK S. RECKLER  
D.B. 974, PG. 223

NOTE: THIS SURVEY IS EXEMPT FROM HARNETT COUNTY SUBDIVISION REGULATIONS BY DEFINITION.

COUNTY PLANNER DATE



NOT TO SCALE  
VICINITY MAP



NORTH BY  
PLAT # 2007-417

MINIMUM BUILDING SETBACKS:  
FRONT - 35'  
SIDE - 10'  
SIDE STREET - 20'  
REAR - 75'

NOTES:  
1. ALL DISTANCES FROM PIPE OR IRON ROD  
2. NEW IRON PIPE OR IRON ROD  
3. ALL DISTANCES FROM IRON ROD  
4. UNLESS OTHERWISE SPECIFIED  
5. ALL DISTANCES TO BE MEASURED TO THE CENTERLINE OF THE ROAD  
6. ALL DISTANCES TO BE MEASURED TO THE CENTERLINE OF THE ROAD  
7. ALL DISTANCES TO BE MEASURED TO THE CENTERLINE OF THE ROAD  
8. ALL DISTANCES TO BE MEASURED TO THE CENTERLINE OF THE ROAD  
9. ALL DISTANCES TO BE MEASURED TO THE CENTERLINE OF THE ROAD  
10. ALL DISTANCES TO BE MEASURED TO THE CENTERLINE OF THE ROAD



JAMES N. CLINE  
D.B. 1868, PG. 170

ROBERTS ROAD 60' R/W (PRIVATE SOIL ROAD)  
S. 8541.57E 319.11'  
S. 49 27 08 E 58.72'  
CONTROL CR.  
CONTROL CR.  
CONTROL CR.  
CONTROL CR.

LOT 19  
4.76 AC. BY DEED  
D.B. 2381, PG. 396

LOT 19-A  
20,793 sq-ft.  
(0.48 AC.)

