

Initial Application Date:		Application #				
Central Permitting	COUNTY (420 McKinney Pkwy, Lilling		FRESIDENTIAL LAND L 6 Phone: (910) 893-7			www.harnett.org/permits
_	VEY MAP, RECORDED DEED (·		
LANDOWNER:			Mailing Address			
City:	State:	_ Zip:	Contact No:	Email	:	
APPLICANT*:		Mailing A	Address:			
City:			Contact No:	Emai	l:	
*Please fill out applicant informa	tion if different than landowner					
ADDRESS:			PIN:			
Zoning: Flood:	Watershed	:	Deed Book / Page:			
Setbacks – Front:	_ Back: Side:	Corn	er:			
PROPOSED USE:						
☑ SFD: (Sizex) # Bedrooms: # Bath	ns: Basem	nent(w/wo bath): Gar	rage Deck	Crawl Space	Monolithic Slab: Slab: X
TOTAL HTD SQ FT	·			=		
			\ <u></u>	_,	_, , ,, ,	•
☐ Modular: (Sizex) # Bedrooms # I	Baths Ba	sement (w/wo bath)	Garage: Site Bui	t Deck: Or	FrameOff Frame
TOTAL HTD SQ FT	(Is the s	econd floor fi	nished? () yes () no	o Any other site built	additions? ()	yes () no
Manufactured Home: _	SWDWTW (S	izex_) # Bedrooms:	_ Garage:(site bui	lt?) Deck:	_(site built?)
☐ Duplex: (Sizex_) No. Buildings:	N	o. Bedrooms Per Unit:		TOTAL HTD SQ	FT
						<i>u</i> = .
☐ Home Occupation: # Re	ooms:Use):	Hours of Op	peration:		#Employees:
☐ Addition/Accessory/Oth	er: (Sizex) Us	se:			_ Closets in add	ition? () yes () no
TOTAL HTD SQ FT	GARAGE					
Water Supply: Count	y Existing Well					
Sewage Supply: New	Septic Tank Expansion	on Relo	Complete New Well App cationExisting Septi	ic Tank County :		
(Complete E Does owner of this tract of la	nvironmental Health Checkind, own land that contains				listed above? () ves () no
Does the property contain ar	•			,	_	
Structures (existing or propo		_			Other (specifi	/) .
If permits are granted I agree I hereby state that foregoing						
	Lisa Bau	re				
	Signature of Owner of	or Owner's A	gent	Date		

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

- <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

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

<u>SEPTIC</u>							
If applying for authorizati	ion to construct please indicate desired system type(s): can b	e ranked in order of preference, must choose one.					
{}} Accepted	{}} Innovative {}} Conventional {	} Any					
{}} Alternative	{}} Other						
	y the local health department upon submittal of this applic s "yes", applicant MUST ATTACH SUPPORTING DO						
{}}YES	Does the site contain any Jurisdictional Wetlands?						
{}}YES	Do you plan to have an <u>irrigation system</u> now or in the future?						
{}}YES	Does or will the building contain any <u>drains</u> ? Please explain						
{}}YES	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?						
{}}YES	Is any wastewater going to be generated on the site other than domestic sewage?						
{}}YES	Is the site subject to approval by any other Public Agency?						
{}}YES	Are there any Easements or Right of Ways on this property?						
{}}YES	Does the site contain any existing water, cable, phone o	r underground electric lines?					
	If yes please call No Cuts at 800-632-4949 to locate the	e 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.