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nitial Application Date: 06/21/2022		Application #		
		RESIDENTIAL LAND USE APPLIC Phone: (910) 893-7525 ext:1		
·		,	WHEN SUBMITTING A LAND USE APPLICATION**	
_ANDOWNER: D. R. Horton, Inc.		Mailing Address: 2000 Aer	ial Center Parkway Ste. 110A	
			Email: nskarim@drhorton.com	
APPLICANT*: D. R. Horton, Inc. / Nic	helle Karim Mailing Ac	ldress: 2000 Aerial Center Pa	rkway Ste. 110A	
Dity: Morrisville	State: NC Zip: 27560			
Please fill out applicant information if different that		0653-68-830	5 000	
ADDRESS: 421 Silver Maple Driv			5.000	
Zoning: RA-30 Flood: MINIMAL 70' 15'				
Setbacks – Front: 20' Back: 15'	Side: Corner	:		
TOTAL HTD SQ FT	(Is the second floor finis	shed? () yes () no Any othe	_(site built?) Deck:(site built?)	
Home Occupation: # Rooms:	Use:	Hours of Operation:	#Employees:	
	x) Use: ARAGE	_	Closets in addition? () yes () no	
Water Supply: County Existi Sewage Supply: New Septic Tank (Complete Environmental H Does owner of this tract of land, own land the	Expansion Reloca ealth Checklist on other side at contains a manufacture	complete New Well Application at the strong septic Tank // de of application if Septic) d home within five hundred feet (500)	_ County Sewer	
	_		Other (specify):	
			ng such work and the specifications of plans subm	
hereby state that foregoing statements are		e best of my knowledge. Permit sub	pject to revocation if false information is provided. /21/2022	

Nichelle Karim Signature of Owner or Owner's Agent 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



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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 authorizat	ion 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	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 drains? 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 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.