

Initial Application Date:	Application #	
	CU#	
Central Permitting 420 McKinney Pkwy, Lillington, NC 27546	BIDENTIAL LAND USE APPLICATION Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793	www.harnett.org/permits
*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURC	HASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAI	ND USE APPLICATION**
LANDOWNER: Doubly F LLC.	Mailing Address: PO 5975	4.0
City: Bradway State: NL Zip: 27505 Co	intact No: <u>919 906 4069</u> Email: <u>Southe</u> Windstr	ean inet
Adulting Address	no. (FI) 8 /)	
City: Broadway State: VC Zip: 23505 Co	ontact No: 919 906 4069 Email: Southern Winds	tream.net
ADDRESS: 4668 Mencell Hobbs Farm	PIN: 0566-39-8502,00	
Zoning: RA 208 Flood: Watershed: Deed	Book / Page:	
Setbacks - Front: 35' Back: 25' Side: 10' Corner:	2 <i>0′</i>	
PROPOSED USE:		Stem Monolithic
SFD: (Size <u>30 x 44)</u> # Bedrooms: 3 # Baths: 2 Basement(next HTD SQ FT 1200 GAPAGE SQ FT (Is the bonus room fi	w/wo bath): Garage: Deck: Crawl Space: nlshed? () yes () no w/ a closet? () yes () no	Slab:_XSlab:
Modular: (Sizex) # Bedrooms # Baths Baseme LOTAL HTD SQ F1 (Is the second floor finished Manufactured Home:SWDWTW (Sizex Duplex: (Sizex) No. Buildings: No. B	ed? () yes () no Any other site built additions? (_) # Bedrooms: Garage:(site built?) Deck) yes () no ::(site built?)
☐ Home Occupation: # Rooms:Use:		
Addition/Accessory/Other: (Sizex) Use:	Closets in	addition? () yes () no
TOTAL HID SOFT GARAGE		
Water Supply: County Existing Well New Well (# (Need to Cor Sewage Supply: New Septic Tank Expansion Relocation (Complete Environmental Health Checklist on other side Does owner of this tract of land, own land that contains a manufactured in the contains and the contains a manufactured in the contains a ma	mpiete New West Application at the same time as New onExisting Septic Tank County Sewer of amplifusion if Sentici	ank)
Does the property contain any easements whether underground or over-		
Structures (existing or proposed): Single family dwellings:	Manufactured Homes: Other (sp	pecify):
If permits are granted I agree to conform to all ordinances and laws of the I hereby state that foregoing statements are accurate and correct to the	e State of North Carolina regulating such work and the s best of my knowledge. Permit subject to revocation if fa	specifications of plans submitted.
Signature of Owner's Ager	12-2-22 Date 22	
***It is the owner/applicants responsibility to provide the county wi to: boundary information, house location, underground or over incorrect or missing information	ith any applicable information about the subject proj	are not responsible for any

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 RECOME INVALID. The permit is valid for either 60 months or without expiration depending upon docu X

ocumentation	submitted. (C	mplete site plan = 60 months; Complete plat = without expiration)
• All be Pla buil Pla If proto k All Fail	property iro clearly flagge ce "orange h dings, swimm ce orange En roperty is thic pe performed lots to be a lure to unco vironmental low above in epare for inse d then but lice	th New Septic System as must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must approximately every 50 feet between corners. buse corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, outling pools, etc. Place flags per site plan developed at/for Central Permitting. Vironmental Health card in location that is easily viewed from road to assist in locating property. It is allow the soil evaluation inspectors should be able to walk freely around site. Do not grade property. It is allow the soil evaluation of the soil evaluation of the soil evaluation. Second within 10 business days after confirmation. Second return trip fee may be incurred for the confirmed ready. Health Existing Tank Inspections Inspections for placing flags and card on property. ection by removing soil over outlet end of tank as diagram indicates, and lift back in place. (Unless inspection is for a septic tank in a mobile home park) Inspect of the New York of the property in the soil evaluation of the property. It is a septic tank in a mobile home park) Inspect of the New York of the property lines of the property in the soil of the property. It is a septic tank in a mobile home park) Inspect of the New York of the property lines of the property in the property lines of the property in the property lines of the property in the property lines of the p
		MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION.
SEPTIC If applying i	for authorizatio	to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{ } Acce	pted	$\{ _ \}$ Innovative $\{ \underline{I} \}$ Conventional $\{ \underline{3} \}$ Any
{2} Alter	native	{}} Other
The applica	nt shall notify	he local health department upon submittal of this application if any of the following apply to the property in 'yes'', applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{ <u>X</u> } №	Does the site contain any Jurisdictional Wetlands?
{}}YES	NO (X)	Do you plan to have an irrigation system now or in the future?
{}}YES	{_K} NO	Does or will the building contain any drains? Please explain
{}}YES	{ K} NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	{ <u>X</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	{\delta} NO	Is the site subject to approval by any other Public Agency?
{_}}YES	{ <u>X</u> } 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.
Indiabation to a second security or and	an increase the state of the second s	on And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State
Officials Ar	e Granted Rivi	Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I

Th 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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