

Initial Application Date:	THE ASSESSMENT OF THE PROPERTY
The second section and the second sec	Application #
COUNTY OF HARNETT DEGIS	CU#
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFICE TO DUTIES)	one: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER: LOCK ON HOLDINGS INC. M.	A STATE OF MELLINATION
city: Agier state zin: 2006	alling Address: 10 POX A 155
APPLICANTS SV & Mora Total Many	Of a semail Southern touchhomes 1)
City: And Address:	10 Box 2135
*Please fill out applicant information if different than landowner	ot NA196394672 Email: Southern touchhomes 11c
AUDRESS: 100 / BONDECIA Ch	95) 8, 10 1004 a Goma, a
Zoning(A 201 Flood: M) Watershed:	K/Page: 4175:2999
Setbacks - Front: 35 Back: 25 Side: 0 Corner: 20	11/2/0
PROPOSED USE:	
SFD: (Size 30 x 44) # Bedrooms: 3 # Baths: 2 Basement(w/wo TOTAL HTD SQ FT 64 SQARAGE SQ FT X (Is the bonus room finished)	/
TOTAL HTD SQ FT OY SGARAGE SQ FT X (Is the bonus room finishe	bath): Garage: Deck: Crawl Space: Slab: Slab: d? () yes () no (if yes add in with # bedrooms)
no gondore	yes () no (if yes add in with # bedrooms)
TOTAL LITE COLUMN # Bedrooms # Baths Basement (w.	/wo bath) Garage: Site Built Deck:
	/ yes () no Any other site built additions? () yes (_) no
Manufactured Home:SWDWTW (Sizex) # B	edroome: Corner (-1) to the
Dunlay (Sina	Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings:No. Bedroom	ns Per Unit:TOTAL HTD SO FT
Home Occupation: # Rooms:Use:	Hours of Operations
D Addition/Assessment	#Employees:
TOTAL UTD 00 FT	Closets in addition? () yes () no
Water Supply: County Existing Well New Well (# of dwe. New Septic Tank Expansion Relocation Complete Environmental Health Checklist on other side of appliance of this tract of land, own land that contains a manufactured home were stored to the state of land.	
Sewage Supply: New Septic Tonk (Need to Complete)	New Well Application at the same time as New Texts before final
Complete Environmental Health Checklist on other side of appl	Existing Septic Tank County Sewer
Does owner of this tract of land, own land that contains a manufactured home w	ithin five hundred feet (500') of tract listed above? () yes () no
and property contain any easements whether underground or overhead () ves () no
Structures (existing or proposed): Single family dwellings:Ma	nufactured 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 r	my knowledge. Permit subject to revocation if false information is provided.
Signature of Owner's Agent to: houndary information in the county with any	11-50-25
to: houndary information responsibility to provide the county with any	Date

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*** to: boundary information, house is

APPLICATION CONTINUES ON BACK

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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 docuprentation 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

CEDTIC

If applying	for authorizati	ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
{_}} Acc	epted	[_] Innovative {\overline{	
(_) Alte	rnative	{_}} Other	
The applica question. I	ant shall notify f the answer is	the local health department upon submittal of this application if any of the following apply to the property in superior with the support of the property in supplicant MUST ATTACH SUPPORTING DOCUMENTATION:	
{_}}YES	NO	Does the site contain any Jurisdictional Wetlands?	
{_}}YES	(V) NO	Do you plan to have an irrigation system now or in the future?	
{_}}YES	No 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?	
Y Warre Day		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 to 1.5			

ation 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 Ide on 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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