

Application #			
			www.harnett.org/permits
DED DEED (OR OFFER TO PUR	RCHASE) & SITE PLAN ARE REQUIRED	WHEN SUBMITTING A LAN	ID USE APPLICATION**
	Mailing Address: 2000 Aer	ial Center Parkv	vay Ste. 110A
tate: NC Zip: 27560	Contact No: 919-280-1025	Email: jaevanse	el@drhorton.com
ca Evans-El Mailing Add	ress: 2000 Aerial Center Par	rkway Ste. 110A	
tate: NC Zip: 27560			
	PIN: 0528-66-04	152.000	
_ 0.00.			
4. "P-#-25p	Marker halls Organiza	ale Orașil Orașa	Monolithic
	,, ,		
ms # Baths Basen	nent (w/wo bath) Garage:	Site Built Deck:	On FrameOff Frame
(Is the second floor finish	ned? () yes () no Any other	site built additions? (_) yes () no
TW (Size v) # Bedrooms: Garage:	(site huilt?) Deck:	(site huilt?
		_(Site built:) Deck	(Site built:)
gs: No. E	Bedrooms Per Unit:	TOTAL HTD S	Q FT
Use:	Hours of Operation:		#Employees:
:) Use:		Closets in ac	ddition? () yes () no
RAGE	-		
g Well New Well (# (Need to Co	‡ of dwellings using well mplete New Well Application at the) *Must have operable same time as New Tar	water before final <mark>k</mark>)
_ Expansion Relocati	onExisting Septic Tank	County Sewer	
it contains a manufactured	home within five hundred feet (500)) of tract listed above?	() yes (<u>\</u>) no
ether underground or over	head (🏒) yes () no		
ily dwellings: proposed	Manufactured Homes:	Other (spec	sify):
		07/2023	
of Owner or Owner's Agento to provide the county w	nt ith any applicable information ab	Date pout the subject prope	rty, including but not limited
	case NC Zip: 27560 (Case N	COUNTY OF HARNETT RESIDENTIAL LAND USE APPLIC CWY, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 DED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED Mailing Address: 2000 Aerial Center Pail tate: NC Zip: 27560 Contact No: 919-280-1025 Tatershed: Deed Book / Page: 4093:0087 Side: 10' Corner: 20' 4 # Baths: 2.5 Basement (w/wo bath): Garage: Deeded Sook / Page: 4093:0087 Side: 10' Corner: 20' TW (Size x) # Bedrooms: Garage: Deeded Sook / Page: 4093:0087 TW (Size x) # Bedrooms: Garage: Deeded Sook / Page: 4093:0087 TW (Size x) # Bedrooms: Garage: Deeded Sook / Page: 4093:0087 TW (Size x) # Bedrooms: Garage: Deeded Sook / Page: 4093:0087 TW (Size x) # Bedrooms: Garage: Deeded Sook / Page: 4093:0087 TW (Size x) # Bedrooms: Garage: Deeded Sook / Page: Deeded Sook / Page: Deeded Sook / Page: 4093:0087 TW (Size x) # Bedrooms: Garage: Deeded Sook / Page:	COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION WY, Lillington, NC 27546 Phone: (910) 893-7525 ext: Fax: (910) 893-2793 DED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND Mailing Address: 2000 Aerial Center Parkway tate: NC Zip: 27560 Contact No: 919-280-1025 Email: jaevanset CCA Evans-El Mailing Address: 2000 Aerial Center Parkway Ste. 110A tate: NC Zip: 27560 Contact No: 919-280-1025 Email: jaevanset(landowner 9 PIN: 0528-66-0452.000 Vatershed: Deed Book / Page: 4093:0087 Side: 10' Corner: 20' 4 # Baths: 2.5 Basement(w/wo bath): Garage: Deck: Crawl Space: 411 (Is the bonus room finished? () yes () no w/ a closet? (_) yes () no ms # Baths Basement (w/wo bath) Garage: Site Built Deck: ((Is the second floor finished? (_) yes () no Any other site built additions? (TW (Size x) # Bedrooms: Garage: (site built?) Deck: gs: No. Bedrooms Per Unit: TOTAL HTD Site Lyse: Relocation Existing Septic Tank County Sewer Expansion Relocation Existing Septic Tank County Sewer atth Checklist on other side of application if septic) It contains a manufactured home within five hundred feet (500') of tract listed above?

t 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"

SEPTIC					
If applying	for authorization	n to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.			
{}} Acce	epted	$\{_\}$ Innovative $\{_\}$ Conventional $\{\checkmark\}$ Any			
{}} Alter	rnative	{}} Other			
		the 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>√</u> } NO	Does the site contain any Jurisdictional Wetlands?			
{}}YES	{ <u>√</u> } NO	Do you plan to have an <u>irrigation system</u> now or in the future?			
{}}YES	{ <u>✓</u> } NO	Does or will the building contain any drains? Please explain			
{ <mark>✓</mark> }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	{ <u>✓</u> } 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?			
{ <mark>✓</mark> }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.