

Initial Application Date: 9/12/2023 Application # _____

da Application Bate.		-		741		
Central Permitting	108 E. Front S		HARNETT RESIDENTIAL NC 27546 Phone: (9°			www.harnett.org/permits
A RECORDED S	SURVEY MAP, RECO	ORDED DEED (OR	OFFER TO PURCHASE) & SIT	E PLAN ARE REQUIRED	WHEN SUBMITTING A LA	ND USE APPLICATION
NDOWNER: Orian	a Jaimes-Cha	avez	Mailing A	ddress: 6625 Wir	nberly Rd	
y: Willow Spring		State: NC Zi	p:27592	919-438-9749	Email: Orianaj97	'@gmail.com
_{PLICANT*} . Oriana	Jaimes-Chav	ez/	Mailing Address:			
ase fill out applicant info	rmation if different th	nan landowner	p: Contact No: _			
DRESS:			PIN	ı:1518-87-6616		
ning:Flo	od:	Watershed:	Deed Book / Pa	ge: <u>BK 4203 PG</u>	606-606(1)	
			Corner:			
						
OPOSED USE:	0.41	4	7 6	2028' 1009'	1307'	Monolithic
SFD: (Sizex_	61) # Bedroom	ns:# Baths:_	7 Basement(w/)vo bath):	Garage: D	eck: Crawl Space:	Slab: Slab:
TAL HTD SQ FT428	^{3'} GARAGE SQ F	T 1009' (Is the	bonus room finished? (_) yes () no w/ a c	loset? () yes () no	(if yes add in with # bedro
Modular (Size	x)#Bedro	ooms # Bath	ns Basement (w/wo b	ath) Garage	Site Built Deck	On Frame Off Frame
•	· ·		nd floor finished? () ye	· -		
IALIIID OQTI		(13 the 3eco	rid floor fiffished: () ye	s () iio Aily otile	i site built additions: (_	
				_		
Manufactured Home	::SWDV	WTW (Size	x) # Bedroo	oms: Garage:	_(site built?) Deck:	(site built?)
Dunley: (Size	x \ \ No Buil	dinas:	No. Bedrooms Pe	er l Init:	TOTAL HTD S	SO FT
Duplex: (0120	<u>,x</u>	umgo	No. Beardonis i	<u> </u>		
Home Occupation:	# Rooms:	Use:	Ho	ours of Operation:		#Employees:
Addition/Accessory/	Other: (Size	y)llse.			Closets in a	ddition? () yes () no
	_				0103013 111 6	ddition: (
TAL HTD SQ FT		SARAGE				
ter Supply: Co	untv Fxis	ting Well	_New Well (# of dwellings	s using well) *Must have operable	water before final
			(Need to Complete New	Well Application at th	<mark>e same time as New Ta</mark>	nk)
1			·			<u> </u>
vage Supply: \(\sum_{\text{Complet}}\) N	ew Septic Tank	Expansion _	Relocation Exis	ting Septic Tank	_ County Sewer	
(Complet	e Environmental I	Health Checklist	Relocation Exist on other side of application anufactured home within	on if Septic)	_	() yes (√) no
(<mark>Complet</mark> es owner of this tract o	<mark>e Environmental l</mark> of land, own land t	<mark>Health Checklist</mark> that contains a n	on other side of application	on if Septic) five hundred feet (50	_	() yes (<u>\(\frac{1}{2} \)</u>) no
es owner of this tract of	e Environmental I of land, own land t n any easements	Health Checklist that contains a n whether undergi	on other side of application anufactured home within round or overhead () years and a	on if Septic) five hundred feet (50 es (1) no	_	
(Completes owner of this tract of this tract of the property contains or productures (existing or pro-	e Environmental I of land, own land to n any easements oposed): Single fa	Health Checklist that contains a n whether undergi amily dwellings:_	on other side of application nanufactured home within round or overhead () you Proposed Manufa	on if Septic) five hundred feet (50 es () no actured Homes:	0') of tract listed above? Other (spe	cify):
(Completes owner of this tract of the property contain uctures (existing or preferrits are granted I appropriately state that forego	e Environmental I of land, own land to on any easements oposed): Single fa gree to conform to ing statements ar	Health Checklist that contains a n whether undergo amily dwellings:_ o all ordinances te accurate and	on other side of application anufactured home within round or overhead () years and a	on if Septic) five hundred feet (50 es () no actured Homes: orth Carolina regulati	0') of tract listed above? Other (spe	cify): pecifications of plans subr

Signature of Owner or Owner's Agent

***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 dogumentation 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 <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 authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Accepted		$\{_\}$ Innovative $\{_\}$ Conventional $\{\checkmark\}$ Any
{}} Alternative		{}} 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	{ X } NO	Does the site contain any Jurisdictional Wetlands?
$\{\underline{x}\}YES$	{}} NO	Do you plan to have an <u>irrigation system</u> now or in the future?
$\{\underline{x}\}YES$	{}} NO	Does or will the building contain any drains? Please explain. Sewer drains, basement drains
{}}YES	{ <u>X</u> } №	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	{ <u>x</u> } №	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	{ <u>X</u> } 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	{ <u>X</u> } 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.