

| Initial Application Date:  |  | Application #  |   |  |   |  |
|--|--|--|---|--|---|--|
|  |  |  |   |  |   |  |
| Central Permitting 420 N   | COUNTY OF HA<br>McKinney Pkwy, Lillington, N   | ARNETT RESIDENTIAL LA<br>IC 27546 Phone: (910) 8             |   |  | www.harnett.org/permits                                     |  |
| **A RECORDED SURVEY I  | MAP, RECORDED DEED (OR OF  | FER TO PURCHASE) & SITE PL                                   | AN ARE REQUIRED WHE   | N SUBMITTING A LAN                           | ND USE APPLICATION**  |  |
| LANDOWNER Family Build   | ling Company II LL   | C Mailing Addre  | <sub>ss:</sub> 1016 Mockinç                                 | gbird Drive                                  |   |  |
|  |  |  |   |  | ng@familybuildingco.com                                     |  |
| APPLICANT*:  | N  | failing Address:   |   |  |   |  |
| City:*Please fill out applicant information if                               | State: Zip:_   | Contact No:  | E   | Email:                                       |   |  |
|  |  | DIN. 06  | 313-74-8651   |  |   |  |
| ADDRESS: $\frac{947 \text{ Jasmine R}}{200000000000000000000000000000000000$ | al Flood Risk  | Pin:   | <br>3644:895  |  |   |  |
| Setbacks – Front: 36' Bac  | watersned:<br>136.6' s:.la. 30.2'  | Deed Book / Page: _  |   |  |   |  |
|  | ;k: Side:  | _ Corner:  |   |  |   |  |
| PROPOSED USE: 28' 55.3'  |  |  |   |  | Monolithic  |  |
| SFD: (Size 28' x 55.3)' # TOTAL HTD SQ FT 1401 GARA                          |  |  |   |  |   |  |
| O'METTE GREET  | (IS the Se   | mas room imisrica. () ye                                     | ) ( <u> </u>  | . (  | (ii yoo aaa iii wiiii ii boaroomo)                          |  |
| ☐ Modular: (Sizex  |  |  | =   |  |   |  |
| TOTAL HTD SQ FT  | (Is the second   | floor finished? () yes (                                     | _) no Any other site  | built additions? (                           | _) yes () no  |  |
| ☐ Manufactured Home:S  | WDWTW (Size  | x) # Bedrooms:   | Garage:(site  | e built?) Deck:_                             | (site built?)   |  |
| □ Duplex: (Sizex   | ) No. Buildings:   | No. Bedrooms Per Un  | it:   | _ TOTAL HTD S                                | Q FT  |  |
| ☐ Home Occupation: # Rooms   | s: Use:  | Hours  | of Operation:   |  | #Employees:   |  |
| ☐ Addition/Accessory/Other: (  | Sizex) Use:  |  |   | Closets in a                                 | ddition? () yes () no                                       |  |
| TOTAL HTD SQ FT  | GARAGE   |  |   |  |   |  |
| Water Supply: X County _ Sewage Supply: X New Sept                           | Existing Well N  | lew Well (# of dwellings usin                                | ng well) * <b>M</b> i Application at the san                | ust have operable                            | water before final<br><mark>nk</mark> )                     |  |
| (Complete Environment of this tract of land, of                              | onmental Health Checklist on   | other side of application if S                               | Septic)   |  | ( ) ves ( ) no  |  |
| Does the property contain any ea   |  |  | ` '   | tract listed above :                         | () yes () no  |  |
|  | -  | ,  | ,   | 0:1 /  | · · ·   |  |
| Structures (existing or proposed)  |  |  |   |  |   |  |
| If permits are granted I agree to a I hereby state that foregoing state      | conform to all ordinances and core amounts are accurate and core   | d laws of the State of North<br>rect to the best of my knowl | Carolina regulating su<br>edge.  Permit subject :           | ch work and the sp<br>to revocation if false | ecifications of plans submitted. e information is provided. |  |
|  | Natthew Szal   |  | 1/5/24  |  |   |  |
| ***It is the owner/applicants re   | Signature of Owner or |  |   | ate<br>the subject prope                     | rty, including but not limited                              |  |
| to: boundary information,  | house location, undergrou  | ind or overhead easement information that is contain         | <mark>s, etc. The county or</mark><br>ed within these appli | its employees are ications.***               |   |  |
|  |  |  |   |  |   |  |

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"

| <u>SEPTIC</u>  |                           |   |                          |  |  |  |
|--|---------------------------|---|--------------------------|--|--|--|
| If applying  | for authorization         | tion to construct please indicate desired system type(s): can be ranked in order of prefe | erence, must choose one. |  |  |  |
| {}} Acce   | epted                     | {}} Innovative X} Conventional {} Any   |                          |  |  |  |
| {}} Alte   | rnative                   | {}} 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 <b>MUST ATTACH SUPPORTING DOCUMENTATION</b> : |                           |   |                          |  |  |  |
| {}}YES   | { <u>X_</u> } NO          | Does the site contain any Jurisdictional Wetlands?  |                          |  |  |  |
| {}}YES   | <u>X_</u> } NO            | Do you plan to have an <u>irrigation system</u> now or in the future?                     |                          |  |  |  |
| {}}YES   | { <b>X</b> _} NO          | Does or will the building contain any drains? Please explain.                             |                          |  |  |  |
| {}}YES   | $\{X_{}\}$ NO             | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? |                          |  |  |  |
| {}}YES   | $\{X \}$ NO               | Is any wastewater going to be generated on the site other than domestic sewage            | ?                        |  |  |  |
| {}}YES   | { <b>X</b> _} NO          | Is the site subject to approval by any other Public Agency?                               |                          |  |  |  |
| {}}YES   | $\{\underline{X}_{}\}$ NO | Are there any Easements or Right of Ways on this property?                                |                          |  |  |  |
| {}}YES   | $\{\underline{X}\}$ NO    | Does the site contain any existing water, cable, phone or underground electric le         | ines?                    |  |  |  |
|  |                           | If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free se         | rvice.                   |  |  |  |

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.