

Initial Application Date: 4-2-25 Application #

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|---|---|---|---|-------------------------|
| Central Permitting 420 McKinney l | | BIDENTIAL LAND USE APPLI Phone: (910) 893-7525 ext:2 | | www.harnett.org/permits |
| **A RECORDED SURVEY MAP, RECO | RDED DEED (OR OFFER TO PURC | HASE) & SITE PLAN ARE REQUIRE | D WHEN SUBMITTING A LAN | ID USE APPLICATION** |
| LANDOWNER: David Graham | | Mailing Address: 4941 Wy | ynford Ct. | |
| City: Harrisburg | State: NC Zip: 28075 Contact | _{No:} 910-745-0001 | _{Email:} hollywingard | @onsitehomesnc.com |
| APPLICANT*: Onsite Homes, LL | C. Mailing Addres | ss: 2931 Breezewood | Ave. Ste. 202 | |
| City: Fayetteville State: | NC Zip: 28303 Co | ntact No: 910-745-0001 | Email: hollywingard@ | onsitehomesnc.com |
| ADDRESS: TBD Graham Mills La | ane | | x01x028 7 9575-0 | 0-5979 |
| Zoning: RA-20R Flood: N/A | Watershed: 137 Deed | Book / Page: 4274:1872 | < 808:0731 | |
| Setbacks - Front: 152.5' Back: 529. | 3' Side: 198' Corner: | | | |
| PROPOSED USE: | | | | |
| SFD: (Size 73 x 57) # Bedrooms TOTAL HTD SQ FT 3900 GARAGE SQ F | | | | |
| ☐ Modular: (Sizex) # Bedro TOTAL HTD SQ FT | | nt (w/wo bath) Garage: d? () yes () no | | |
| ☐ Manufactured Home:SWDW | TW (Sizex |) # Bedrooms: Garage:_ | (site built?) Deck:_ | (site built?) |
| ☐ Duplex: (Sizex) No. Build | ings:No. Be | drooms Per Unit: | TOTAL HTD SO | QFT |
| ☐ Home Occupation: # Rooms: | Use: | Hours of Operation: | | #Employees: |
| □ Addition/Accessory/Other: (Size | _x) Use: | | Closets in ac | ldition? () yes () no |
| TOTAL HTD SQ FT G | ARAGE | | | |
| Water Supply: County Existi | ng Well New Well (# o | f dwellings using well 1 | _) *Must have operable | water before final |
| Water Supply: County Exist Sewage Supply: New Septic Tank (Complete Environmental H | (Need to Com Expansion Relocation | plete New Well Application at the Existing Septic Tank | ne same time as New Tan County Sewer | <mark>ık</mark>) |
| (Complete Environmental H Does owner of this tract of land, own land the | ealth Checklist on other side on the contains a manufactured ho | f application if Septic) ome within five hundred feet (50 | 00') of tract listed above? | ()yes (√)no |
| Does the property contain any easements v | | | , | |
| Structures (existing or proposed): Single fai | | | Other (spec | ify): |
| If permits are granted I agree to conform to I hereby state that foregoing statements are | | est of my knowledge. Permit su | | |

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 ***

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

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)

- <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 | on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. | | |
| { <u>√</u> } Acce | epted | $\{_\}$ Innovative $\{\checkmark\}$ Conventional $\{_\}$ 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 | { ✓ } NO | Does or will the building contain any <u>drains</u> ? Please explain | | |
| {}}YES | $\{\underline{\checkmark}\}$ 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 | { <u>✓</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. | | |

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.