

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

RESIDENTIAL LAND USE APPLICATION

SITE ADDRESS: 520 Tree Bark Lane PIN: 9564	1-83-2478-000
LANDOWNER: Adam Hernandez Mailing Address: 520	
City: Cameron State: NC Zip: 28326 Phone: 806.377.4125 Email:	
*Please fill out applicant information if different finan landowner. APPLICANT: KOSS Ledford The Barndomin Mailing Address: 163 Ledford The Barndomin Mailing Mailing Address: 163 Ledford The Barndomin Mailing Ma	E. Main St. Ste 1
PROPOSED USE:	
Single Family Dwelling: (Size <u>D8 x U3</u>) # Bedrooms: <u>4</u> # Baths: <u>2.6</u> Garage: Att	ached, Detached Accessory: Deck, Patio
TOTAL HTD SQ FT: 1157 GARAGE SQ FT: 1194 Foundation Type: Crawl Space	(Circle One) (Circle One
TOTAL HID SQ PI. ATO T GARAGE SQ PI. 11 14 Poundation Type. Claw Space.	de Stell Wall. E. Mono Glab. A basement. E.
☐ Modular: (Sizex) # Bedrooms:# Baths: Garage: Attached, Detache (Circle One)	d Accessory: Deck, Patio, Porch (Circle One)
☐ Manufactured Home: SW ☐ DW ☐ TW ☐ (Sizex) # Bedrooms: Gara	
ZONING: RA - 20 R	(Circle One) (Circle One)
□ Duplex: (Sizex) # Buildings: # Bedrooms Per Unit:	TOTAL HTD SQ FT:
□ Addition/Accessory/Other: (Sizex) Use:	
UTILITIES:	
Water Supply: County ☐ Existing Well ☐ New Well (# of dwellings using well _	⊥ y /
Sewage Supply: New Septic Tank X Expansion □ Relocation □ Existing S	에서 내가 현존 경기를 다시 얼마나라 그렇게 모든 그들을 기계하였다.
(Complete Environmental Health Checklist on other side of application	n if Septic is selected)
GENERAL PROPERTY INFORMATION:	W
Does the landowner own another tract that contains a manufactured home within 500 feet?	
Does the property contain any easements, whether underground or overhead? YES X No.	
Structures (existing or proposed): Single Family Dwellings: Manufactured Homes:	Other (specify):
If permits are granted, I agree to conform to all ordinances and laws of the State of North Carolina regular I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. Permits are accurate and correct to the best of my knowledge.	ating such work and the specifications of plans submitted. hit subject to revocation if false information is provided.
	5.30.26
Signature of Owner or Owner's Agent	Date

Permits are valid for 6 months from the issue date, or 12 months from last inspection once inspections have been initiated. It is the owner/applicant's 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.

APPLICATION CONTINUES ON BACK





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Environmental 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 permit shall become invalid. This permit will be valid for 60 months.

Septic ATC Received

□ NEW SEPTIC SYSTEM INSPECTION

- All property irons must be made visible. Place pink flags on each corner of lot & approximately every 50 feet between corners.
- Place orange flags at the comers of each proposed structure per site plan submitted to Central Permitting.
- · Post orange Environmental Health sign in location that is visible from road to assist in locating property.
- If property is thickly wooded, you will be required to 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.

EXISTING TANK INSPECTION

- Follow above instructions for placing flags and sign on property.
- Prepare for inspection by removing soil over outlet end of tank, lift lid straight up (if possible), and then put lid back in place.
 Does not apply to septic tank in a mobile home park
- DO NOT LEAVE LIDS OFF OF SEPTIC TANK

SEPTIC CHECK LIST	Scotic ATC R	ecerred			
If applying for Authorization	to Construct, please indicate	desired system type(s): Ca	n be ranked in ord	er of preference, must cl	noose one.
☐ Accepted	☐ Innovative	□ Conventional	☐ Any	☐ Alternative	
□ Other					
The applicant shall notify to property in question. If the	the local health departme e answer is "yes," applica	nt upon submittal of this apnt MUST ATTACH SUPP	pplication if any o	of the following apply t MENTATION:	o the
YES D NO	Does the site contain an	y jurisdictional wetlands?			

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. I understand that a \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark-house corners and property lines, etc. once lot is confirmed to be ready.

Signature of Owner or Owner's Agent

5·30·25

