

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: 372 Hookbill Lane PIN:	0527-51-2902.000						
LANDOWNER: Caviness & Cates Bldg and Dev Co Mailing Address: 639 Executive Place Ste 400							
CityFayetteville_State:NC_Zip:28305 Phone: (910) 778-7902							
*Please fill out applicant information if different than landowner.							
APPLICANT: SAME AS ABOVE Mailing Address:							
City: State: Zip: Phone:							
PROPOSED USE:							
□ Single Family Dwelling: (Size <u>42 x 57</u>) # Bedrooms: <u>4</u> # Baths: <u>2.5</u> Gara	age: Attached Detached Accessory: Deck Patio Phron						
TOTAL HTD SQ FT: 3509 GARAGE SQ FT: 438 Foundation Type: Crawl	(Circle One)						
Foundation Type. Claws	Space. Stem vvali: Mono Slab: Basement: I						
☐ Modular: (Sizex) # Bedrooms: # Baths: Garage: Attached, D	Detached Accessory: Deck, Patio, Porch (Circle One)						
TOTAL HTD SQ FT:	(child step)						
□ Manufactured Home: SW □ DW □ TW □ (Sizex) # Bedrooms:	_ Garage: Attached, Detached Accessory: Deck, Patio (Circle One) (Circle One)						
ZONING: # Bedrooms Per Unit: # Bedrooms Per Unit:	TOTAL LITE OF T						
Duplex. (Cize) # Buildings # Bedrooms Per Unit:	TOTAL HID SQ FT:						
□ Addition/Accessory/Other: (Sizex) Use:							
UTILITIES:							
Water Supply: County ☑ Existing Well □ New Well (# of dwellings using well) □							
Sewage Supply: New Septic Tank ☑ Expansion □ Relocation □ Existing Septic Tank □ County Sewer □							
(Complete Environmental Health Checklist on other side of application if Septic is selected)							
GENERAL PROPERTY INFORMATION:							
Does the landowner own another tract that contains a manufactured home within 500	feet? YES □ NO 🖫						
Does the property contain any easements, whether underground or overhead? YES	□ NO⊠						
Structures (existing or proposed): Single Family Dwellings: X Manufactured Homes: Other (specify):							
If permits are granted, I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.							
Pamela M Geddie Signature of Owner or Owner's Agent	E/40/0E						
Signature of Owner or Owner's Agent	<u>5/12/25</u> 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.





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.

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 corners 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	<u> CLIST</u>							
If applying for Au	thorization	to Construct, please indicate	desired system type(s): Can	be ranked in orde	er of preference, must choose o	ne.		
x Accepted		□ Innovative	☐ Conventional	☐ Any	☐ Alternative			
☐ 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 MUST ATTACH SUPPORTING DOCUMENTATION:								
YES □	NO X	Does the site contain any jurisdictional wetlands?						
YES □	NO X	Do you plan to have an irrigation system now or in the future?						
YES [NO 🗓	Does or will the building contain any drains? Please explain:						
YES 🗆	NO X	Are there any existing wells, springs, waterlines, or wastewater systems on this property?						
YES □	NO X	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 [NO ₹	Are there any easements or rights-of-way 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.						
have read this a	pplication	and certify that the inform	ation provided herein is tru	e. complete. and	correct. Authorized County a	ind		
	A STATE OF THE STA				ce with applicable laws and re	disensity of		
understand that I	am solely	responsible for the proper	identification and labeling	of all property lin	nes and corners and making t	the		
		A PART OF THE PROPERTY OF THE PROPERTY OF THE PARTY OF TH		and the second of the second o	turn trip fee may be incurred f	for		
failure to uncove	r outlet lic	l, mark house corners and p	property lines, etc. once lot	is confirmed to b	oe ready.			
	<u>.</u>	Pamela W. Gea Signature of Owner's	ldis Agent	<u>5/12</u> Date	<u>2/25 </u>			