

strong roots · new growth

DLIO

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: 356 HOOKBILL Lane PIN: 0527-51-1911.000
LANDOWNER: Moore HI Properties Inc. JAddress: SS Walnut Creek
City Pine hurst State: NC Zip: 2837U Phone: (910) 778-7902 Email: pam@cavinessandcates.com
*Please fill out applicant information if different than landowner.
APPLICANT: Caviness & Cates Building De Mailing Address: (39 Executive Place Suite 406)
City: <u>Fayetteville</u> State: <u>NC</u> zip: <u>28305</u> Phone: 910. 778-7902 Email: <u>pam@Cavinessandcates.com</u>
PROPOSED USE:
Single Family Dwelling: (Size
TOTAL HTD SQ FT: 2Se6 GARAGE SQ FT: 484 Foundation Type: Crawl Space: Stem Wall: Mono Slab: Basement:
Modular: (Size x ) # Bedrooms: # Baths: Garage: Attached, Detached Accessory: Deck, Patio, Porch
TOTAL HTD SQ FT: (Circle One)
☐ Manufactured Home: SW ☐ DW ☐ TW ☐ (Sizex) # Bedrooms:Garage: Attached, Detached Accessory: Deck, Patio (Circle One) (Circle One)
ZONING:
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) □
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: Manufactured Homes: Other (specify):
f 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, 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  Date
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.

## 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 IId back in place.

•	*Does not apply to septic tank in a mobile home park*  • DO NOT LEAVE LIDS OFF OF SEPTIC TANK							
SEPTI	C CHECK	<u>CLIST</u>						
If apply	ing for Au	thorization	to Construct, please indicate	desired system type(s): Car	n be ranked in ord	er of preference, must choose one.		
☐ Accepted		pted	☐ 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 ☑ Does the site contain any jurisdictional wetlands?						
	YES 🛘	NO X	O 💢 Do you plan to have an irrigation system now or in the future?					
	YES []	NO Ø	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 []	МО 🛭	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 🛘	МО Й	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?					ound electric lines?		
		,	If yes, please call No Cuts at 800-632-4949 to locate the lines. This is a free service.					
State Oi underst site acc	fficials are and that I essible so	granted in a grant	right of entry to conduct ne responsible for the proper	cessary inspections to def identification and labeling be performed. I understand	ermine complian of all property li I that a \$25.00 re is confirmed to	_		
		s	Pamela M Ged Ignature of Owner or Owner's	dis Agent	Date	<u>6.20</u> 25		