

strong roots + new growth

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: 416 Black Oucklane PIN: 0527.51.5445.000
LANDOWNER: Moore HI Properties Mailing Address. SS Walnut Creek Road
Cit, Pine hurst State: NC Zip. 28374 Phone: (910) 778-7902 Email: pam@cavinessandcates.com
*Please fill out applicant information if different than landowner.
APPLICANT: Cates Building Inc Mailing Address: 639 Executive Place Ste 400
City: Fayetteville State: NC Zip: 28305 Phone: (910)778-7902 Email: pam@cavinessandcates.com
PROPOSED USE:
O Single Family Dwelling: (Size U x 49) # Bedrooms: 3 # Baths 2.5 Garage: Attached, Detached Accessory Deck Patlo, Porch
TOTAL HTD SQ FT: 2048 GARAGE SQ FT: 53 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 DTW C (Sizex) # Bedrooms: Garage: Attached, Detached Accessory: Deck, Patio
ZOMING:
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: X 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'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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6.6.2025

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 undergrowth 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.

Pamela M Geddie
Signature of Owner or Owner's Agent

- 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 	DO NOT LEAVE LIDS OFF OF SEPTIC TANK						
SEPTIC CHEC	K LIST						
If applying for Au	ıthorization	to Construct, please indicate	desired system (ype(s): C	Can be ranked in ord	ler of preference, must choose	one.	
☐ Accepted		☐ Innovative	☐ Conventional	☐ Any	☐ Alternative		
☐ Othe	F						
The applicant sl property in ques	hall notify stion. If th	the local health departmen e answer is "yes," applican	t upon submittal of this t MUST ATTACH SUP	application if any PORTING DOCU	of the following apply to the MENTATION:	'	
YES 🗆	ио ⊠	Does the site contain any jurisdictional wetlands?					
YES 🗆	NO 🖾	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 🛭	Are there any existing wells, springs, waterlines, or wastewater systems on this property?					
YES 🗆	ио Д	Is any wastewater going to be generated on the site other than domestic sewage?					
YES 🗆	ио Д	Is the site subject to approval by any other Public Agency?					
YES 🛘	ио 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?					
		If yes, please call No Cuts	at 800-632-4949 to loc	cate the lines. This	s is a free service.		
State Officials an understand that I site accessible s	e granted I am solely o that a co	right of entry to conduct ned responsible for the proper	cessary inspections to d identification and labelin be performed. I understa	etermine compliar ng of all property li nd that a \$25.00 re	I correct. Authorized County ice with applicable laws and nes and corners and making turn trip fee may be incurred be ready.	rules. I g the	