

Initial Application Date:	Appli	cation #
		CU#
	NETT RESIDENTIAL LAND USE APPLICA 27546 Phone: (910) 893-7525 ext:1	TION Fax: (910) 893-2793 www.harnett.org/permits
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER	R TO PURCHASE) & SITE PLAN ARE REQUIRED W	/HEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: RiverWILD Homes	Mailing Address: 114 W. I	Main Street
City: Clayton State: NC Zip.27	520 Contact No:	Email: kelley@staywild.com
APPLICANT*: RiverWILD Homes Mail	ing Address: 114 W. Main Stre	et
City: Clayton State: NC Zip: 27 *Please fill out applicant information if different than landowner	7520 Contact No: 703-965-3952	Email: kelley@staywild.com
_		
ADDRESS: 13 Sundrops Trail		2
Zoning: RA-30 Flood: NO Watershed:	Deed Book / Page: <u>4281/19</u> 26	
Setbacks – Front: 35' Back: 25' Side: 10' C	corner:10'	
PROPOSED USE:		
SFD: (Size 45 38 ) # Bedrooms: 4 # Baths: 2.5 Ba	asement(w/wo bath): Garage: Dec	Monolithic  k: Crawl Space: Slab: ✓ Slab:
TOTAL HTD SQ FT2158 GARAGE SQ FT 401 (Is the bonu	· · · · · · · · · · · · · · · · · · ·	
□ Modular: (Sizex) # Bedrooms # Baths  TOTAL HTD SQ FT (Is the second flo  □ Manufactured Home:SWDWTW (Size	oor finished? () yes () no Any other s	site built additions? () yes () no
□ Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	TOTAL HTD SQ FT
☐ Home Occupation: # Rooms: Use:	Hours of Operation:	#Employees:
□ Addition/Accessory/Other: (Sizex) Use:		Closets in addition? () yes () no
Addition/Accessory/Other: (Sizex) Use:  TOTAL HTD SQ FT GARAGE		Closets in addition? () yes () no
TOTAL HTD SQ FT GARAGE  Water Supply:	v Well (# of dwellings using well)	*Must have operable water before final
TOTAL HTD SQ FT GARAGE  Water Supply:  County Existing Well New (Nee	v Well (# of dwellings using well) ed to Complete New Well Application at the	*Must have operable water before final same time as New Tank)
TOTAL HTD SQ FT GARAGE  Water Supply: County Existing Well New (Nee Sewage Supply: New Septic Tank Expansion Complete Environmental Health Checklist on other septic Services of the supplemental Health Checklist on other septic Services of the supplemental Health Checklist on other septices.	v Well (# of dwellings using well) ed to Complete New Well Application at the selection Existing Septic Tank (selection of application if Septic)	*Must have operable water before final same time as New Tank) County Sewer
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Water Supply: County Existing Well New Sewage Supply: New Septic Tank Expansion I	w Well (# of dwellings using well)  ed to Complete New Well Application at the selectionExisting Septic Tank(  ther side of application if Septic) actured home within five hundred feet (500') or overhead () yes (  Manufactured Homes:	*Must have operable water before final same time as New Tank) County Sewer  of tract listed above? () yes () no Other (specify):
Water Supply: County Existing Well New Sewage Supply: New Septic Tank Expansion I Complete Environmental Health Checklist on ot Does owner of this tract of land, own land that contains a manufactory contain any easements whether underground	w Well (# of dwellings using well) ed to Complete New Well Application at the selectionExisting Septic Tank(ether side of application if Septic) actured home within five hundred feet (500') or overhead () yes ( <ul> <li> no</li> <li> Manufactured Homes:</li> </ul>	*Must have operable water before final same time as New Tank) County Sewer  of tract listed above? () yes () no  Other (specify): such work and the specifications of plans submitted
Water Supply: County Existing Well New New Sewage Supply: New Septic Tank Expansion I Complete Environmental Health Checklist on ot Does owner of this tract of land, own land that contains a manufacture of the property contain any easements whether underground Structures (existing or proposed): Single family dwellings: If permits are granted I agree to conform to all ordinances and lateral contains a manufacture of the property contains and lateral contains are granted I agree to conform to all ordinances and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains and lateral contains a manufacture of the property contains a manufacture of the property contains and lateral contains a manufacture of the property contains and the property contains a manufacture of the property contains and the property contains a manufacture of the property contains and the property contains a manufacture of the property c	w Well (# of dwellings using well)  ed to Complete New Well Application at the section	*Must have operable water before final same time as New Tank) County Sewer  of tract listed above? () yes () no  Other (specify): such work and the specifications of plans submitted

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.\*\*\*

\*This application expires 6 months from the initial date if permits have not been issued\*\*

**APPLICATION CONTINUES ON BACK** 

strong roots • new growth



## \*\*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)

## □ Environmental Health New Septic System

- <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"

<b>SEPTIC</b>			
If applying	for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
{ <b>✓</b> } Acce	epted	{} Innovative {} Conventional {} Any	
{}} Alter	rnative	{} OtherAOWE Permit	
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	{ <b>✓</b> } NO	Does the site contain any Jurisdictional Wetlands?	
{}}YES	{ <b>✓</b> } NO	Do you plan to have an <u>irrigation system</u> now or in the future?	
{}}YES	{ <b>✓</b> } NO	Does or will the building contain any <u>drains</u> ? Please explain	
{}}YES	{ <b>✓</b> } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?	
{}}YES	{ <b>✓</b> } NO	Is any wastewater going to be generated on the site other than domestic sewage?	
{}}YES	{ <b>✓</b> } NO	Is the site subject to approval by any other Public Agency?	
{}}YES	{ <b>✓</b> } NO	Are there any Easements or Right of Ways on this property?	
{}}YES	{ <b>✓</b> } 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.