

Initial Application Date: 10 9 25

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	COUNTY OF HARNETT RESIDENTIAL LANDUSE APPLICATION
**A RECORDED SURVEY M	Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/permits
Chulhan	AP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: SUUTYUY	TOUCH TO MUS LLC Mailing Address: PO Box 2135
City: Trysler	State: NC zip: 27501 Contact No: 919-639-4672 Email Southern two homes 1000 g
APPLICANT*:	Mailing Address:
City:*Please fill out applicant information if di	State: Zip: Contact No: Email:
ADDRESS: 508 Shur	iff Johnson Rd PIN: 0680-58-1084.000
Zoning: ASO Flood: Mil	Materials 924 2720
Setbacks - Front: 39H Back	:238/1 Side: 32.0 Corner: 32.5/
PROPOSED USE:	
SFD: (Size Sull' 381)#B	edrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab:
TOTAL HTD SQ FT 305 GARAG	E SQ FT 123 (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms
	# Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
TOTAL HTD SQ FT_	(Is the second floor finished? () yes () no Any other site built additions? () yes () no
☐ Manufactured Home:SW	DWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
	lo. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT
☐ Home Occupation: # Rooms:_	Use:Hours of Operation:#Employees:
Addition/Accessory/Other: (Siz	ex) Use: Closets in addition? () yes () no
FOTAL HTD SQ FT	GARAGE Closets in addition? () yes () no
,	
Water Supply: County	Existing Well New Well (# of dwellings using well ) *Must have operable water before final
Sewage Supply: New Septic	Tank Expansion Relocation Eviction Control at the same time as New Tank)
Does owner of this tract of land, own	nental Health Checklist on other side of application if Septic)  I land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no
	ments whether underground or overhead () yes () no
Structures (existing or proposed): Si	ngle family dwellings: Manufactured Homes; Other (specify):
permits are granted Lagree to con	form to all audinous and to the first
The second secon	the death my knowledge. Permit subject to revocation if false information is provided.
Sig	nature of Owner's Agent 10/7/2025
to: boundary information, hou	Date onsibility to provide the county with any applicable information about the subject property, including but not limited use 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.*** is application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

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## \*\*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)

□ Envi	ronmental i	Health New Septic Sys	4			
. /	All property	irons must be made v	isible Place "nink prov	perty flags" on each corner iron of lot.	A.II	
• 1	race orang	e house corner flags" a	it each corner of the ne	conceed structure Alex A	s, garages, decks, ou	
• F	Place orange	Environmental Health	card in location that is o	veloped avior Central Permitting.	2	
te	be perform	ed. Inspectors should b	nental mealth requires to	hat you clean out the undergrowth to a	allow the soil evaluation	
A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	III IOIG IO D	addressed wilnin 10	DIIGINGEE MOVE AFFAR	confirmation MOF co	may be incurred for	
L	allure to un	cover outlet lid, mark i	nouse corners and pro	operty lines, etc. once lot confirmed	ready.	
		tal Health Existing Tan				
•	ollow above	instructions for placing	flags and card on prope	ertv.		
	repare for in	Spection by removing s	coil over outlet and of	look on diament to the consum	straight up (if possible)	
		E LIDS OFF OF SEPTIC		eptic tank in a mobile home park)	5 - P (* P 5 5 1 5 1 5 )	
			The state of the s			
SEPTIC				RED TO COMPLETE ANY INSPECTION?		
If applying	g for authoriza	tion to construct please indi-	cate desired system type(s)	can be ranked in order of preference, mus	t choose one	
{_}} Accepted {_		{}} Innovative	(V) Conventional	{ } Any		
{_}} Alto	ernative	{}} Other				
The applic question.	ant shall notif	y the local health departm is "yes", applicant MUST	ent upon submittal of this ATTACH SUPPORTIN	s application if any of the following apply NG DOCUMENTATION:	to the property in	
{}}YES	LYNO		ny Jurisdictional Wetlands			
{_}}YES	( NO	Do you plan to have an	irrigation system now or	in the future?		
{_}}YES	W NO		ng contain any drains? Ple			
{}}YES	NO NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{_}}YES	NO	Is any wastewater going to be generated on the site other than domestic sewage?				
{_}}YES	NO NO	Is the site subject to approval by any other Public Agency?				
{}}YES	NO NO	Are there any Easements or Right of Ways on this property?				
{_}}YES	NO NO	Does the site contain any existing water, cable, phone or underground electric lines?				
		If yes please call No Cu	uts at 800-632-4949 to loc	cate the lines. This is a free service.		
Have Read	d This Applica	tion And Certify That The	Information Provided Her	ein Is True, Complete And Correct. Author	deed Courts 1 1 2	
Officials Ar	o Crantad Die	bt Officer T. C. I.	CONTRACTOR AND	Author	izeu County And State	

IH 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.

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