



Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

LANDOWNER: Greenfield-Serenity LLC Mailing Address: 8601 Six Parks Rd # 270
City: Raleigh State: NC Zip: 27615 Contact No: 630-6641 Email: Kostechn@greenfield.com

APPLICANT: SITESCAPES, LLC Mailing Address: 312 W Millbrook Rd
City: Raleigh State: NC Zip: 27609 Contact No: 919-676-0303 Email: Kim@venture.com

ADDRESS: 0 Piney Grove Rawls Rd PIN: _____

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: N Corner: A

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement (w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____
TOTAL HTD SQ FT _____ GARAGE SQ FT _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # 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 _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built?) Deck: _____ (site built?)

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____ TOTAL HTD SQ FT _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____ x _____) Use: Retaining walls (2) Closets in addition? () yes () no
TOTAL HTD SQ FT _____ GARAGE _____ 12,680 SF

Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank _____ County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () 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): _____

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 foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Burmondshian
Signature of Owner or Owner's Agent

12/20/22
Date

It is the owner/applicants 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.

*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

- **All property irons must be made visible.** 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 **undergrowth** 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"

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- { } 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 Does the site contain any Jurisdictional Wetlands?
- { } YES { } NO 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 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 Is the site subject to approval by any other Public Agency?
- { } YES { } NO Are there any Easements or Right of Ways 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.

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.



Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Greenfield-Serenity LLC Date: 12/20/22
Site Address: 0 Piney Grove Rawls Rd Phone: 919-417-8666
Subdivision: Serenity Ph 6A+6C Lot: _____
Description of Proposed Work: install (2) retaining walls Total Job Cost: 186,396.00

General Contractor Information

Sitescapes LLC Telephone: 919-676-0303
Building Contractor's Company Name
312 W Millbrook Rd # 237 Email Address: kim@venture-e.com
Address
70580
License #

Electrical Contractor Information

Description of Work _____ Service Size: _____ Amps T-Pole: ___ Yes ___ No
Electrical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Ben Mondshen
Signature of Owner/Contractor/Officer(s) of Corporation

12/20/22
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: Ben Mondshen, Principle Date: 12/20/22



SITE-SCAPES

DATE: 07/25/22
PROJECT: Serenity Phases 6A & 6C
LOCATION: Fuquay-Varina, NC
RE: Retaining Wall Installation

SiteScapes, LLC is pleased to offer for your consideration the following quotation for the above referenced project. Please contact John Pennock with any questions at John@venture-e.com or 919-500-9312.

Total Estimated Square Footage of Walls: 13,314 sf

BID ITEM	DESCRIPTION	COST
Retaining Wall Installation	<p>Excavate the footings and install two (2) segmental retaining walls, as shown in the civil engineering plans provided by WithersRavenel seal dated 08/30/21.</p> <p>Note: Only Walls #5 & #9 are included in this proposal.</p> <p>Backfill 1 foot behind the units with #57 stone for drainage. Backfill from drainage zone to back of reinforced zone with on-site dirt, unless deemed necessary by the on-site geotechnical engineer to use import structural fill. Import structural fill is not part of the wall installation price. Please refer to the Reinforced Zone Backfill bid item for add-on cost.</p> <p style="text-align: center;">SRW UNITS Grey Ridge Rock Units or Approved Equal (\$.50/SF Upcharge for Tan/Brown)</p>	<p><u>WALL INSTALLATION</u> = \$186,396.00*</p> <p>*Includes Design, Permitting, Installation and Final Engineering Certification</p>
Reinforced Zone Backfill	<p>Backfill reinforced zone with import fill.</p>	<p><u>IMPORT FILL ADD-ON</u> Approximately 8,876 tons @ \$10-\$12/Ton** = \$88,760.00 - \$106,512.00</p> <p>**the total approximate tonnage is assuming backfilling import fill to the top of cap. Based on other projects done in this vicinity the top 3'-5' may be backfilled with on-site dirt, therefore decreasing total import fill quantity</p>

NOTES:

1. Owner and/or Contractor is responsible for geotechnical testing and inspection (i.e. compaction testing behind wall, approving soil for backfill, bearing capacity, etc.).
2. Owner and/or Contractor is responsible for staking wall locations and footing elevations.



SITE-SCAPES

3. Owner and/or Contractor is responsible for excavating the reinforced zone.
4. One mobilization is included in this proposal. Sitescapes reserves the right to charge \$175.00 per additional mobilization.
5. This proposal is assuming the sub grade for the footings and reinforced zones has the appropriate bearing capacity. If that is not the case, undercut and backfill with suitable material (i.e. either on site soils, processed fill or #57 stone) will be required, and will be deemed necessary and quantified by the on-site geotechnical engineer. This will be an additional cost to the Owner and/or Contractor or addressed via a CO.
6. SiteScapes, LLC is not responsible for grading slopes above or below the retaining wall.
7. Owner and/or Contractor shall detour any excessive water flow directed to the wall to final grade plan.
8. Global Stability Analysis was not completed for this project. Assumptions have been made and need to be validated during design.
9. Should Owner and/or Contractor provide the backfill material, it must be placed within 50' of wall installation location by the Owner and/or Contractor.
10. Owner/Contractor to provide access ramps to the wall installation location every 100'.
11. Location of utilities is the responsibility of the Owner and/or Contractor. Sitescapes, LLC is not liable for damage to utilities that results in a repair cost due to improper locates.
12. The project estimates outlined in this proposal are valid for 6 months from the date of the proposal. Sitescapes, LLC reserves the right to review and adjust these estimates if the proposal is not approved within 6 months.

All of our work is guaranteed for a period of 2 years, with the exception of natural disasters or forces of nature that are out of our control, i.e. floods and weather droughts. In addition, we do not warranty our materials and workmanship that fail or become damaged due to gross negligence by the property owner.

Any quantities or dimensions listed above are estimates. SiteScapes, LLC will attempt to construct project scope of work to as close to the quantities and dimensions listed above. Any addendum's, by the owner or general contractor, to the wall dimensions or additions to the project scope of work will be billed on a per square foot unit price and/or lump sum figure. Addendum's must be documented, dated and signed by both SiteScapes, LLC and the owner/grading contractor prior to performing additional work. SiteScapes, LLC reserves the right to retain any materials not used after completion of the project.

Invoicing:

Invoices will be submitted by Sitescapes, LLC to the Owner at stages of completion based on the Scope of Work, on Sitescapes, LLC letterhead. If required by the Owner, Formal Pay Applications can be used in conjunction with the Sitescapes, LLC invoice.

CONTRACTUAL AGREEMENT

By return signature of the Owner below, Sitescapes, LLC and the Owner acknowledge that they have read and agree to all conditions and terms of this Agreement. Please send signed Agreement to Sitescapes, LLC 312 West Millbrook Road, Suite 237, Raleigh, NC 27609.

Customer: Iron Horse

By: Brian Mondschein, GC

Name/Title: Amanda Byrd

Title: Principal



SITE-SCAPES

Signature: Amanda Byrd

Date: 12/10/22

Signature: B. Mondelani

Date: 12/2/22

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1799518

Filed on: 10/26/2022

Initially filed by:

GreenfieldCommunities

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com (<mailto:support@liensnc.com>)

Address: 223 S. West Street, Suite 900 /
Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (<mailto:support@liensnc.com>)

Project Property

Serenity Subdivision Active Adult Phases 6A,
6B, 7

Piney Grove Rawls Rd
Fuquay-Varina, NC 27526
Harnett County County

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

Property Type

Other

Owner Information

Greenfield Serenity Devco, LLC

8601 Six Forks Rd Ste 270

Raleigh, NC 27615

United States

Email: kosteen@greenfieldcommunities.com

Phone: 919-417-8666

Date of First Furnishing

10/01/2022

View Comments (0)

Technical Support Hotline: (888) 690-7384