



Initial Application Date: 7 · 2 4 · 23

Application # _	BUM 2307.0010
DDD #	CII#

COUNTY OF HARNETT LAND USE APPLICATION Phone: (910) 893-7525 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits Central Permitting (Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 _Mailing Address: 1500 S. Main Street, LANDOWNER: Harnett County Schools State: NC zip: 27546 Contact # 910-703-5275 Email: rpope@harnett.k12.nc.us city: Lillington _Mailing Address: 2529 Harnett Central Rd. APPLICANT*: Harnett Central Middle State: NC zip: 27501 Contact # 910-703-5275 Email: rpope@harnett.k12.nc.us city: Angier *Please fill out applicant information if different than landowner Phone # 910-703-5275 CONTACT NAME APPLYING IN OFFICE: Rodney Pope Address: 1500 S. Main Street, Lillington, NC 27546 Deed Book Page: PROPOSED USE: Multi-Family Dwelling No. Units: ______ No. Bedrooms/Unit: _____ Sq. Ft. Retail Space: _____Type: _____# Employees: _____ Hours of Operation: # Preschoolers: _____ # Afterschoolers: _____ # Employees: ____ Hours of Operation: Davcare Sq. Ft: ______ Type: ______ # Employees: _____ Hours of Operation:___ Industry # Bathrooms: _____ Kitchen: ____ Church Accessory/Addition/Other (Size 24 x 36) Use: Mobile Classroom 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) Existing Septic Tank Y County Sewer Relocation Sewage Supply: Expansion (Complete Environmental Health Checklist on other side of application if Septic Comments: 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.

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

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

ignature of Owner's Agent

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.

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APPLICATION CONTINUES ON BACK

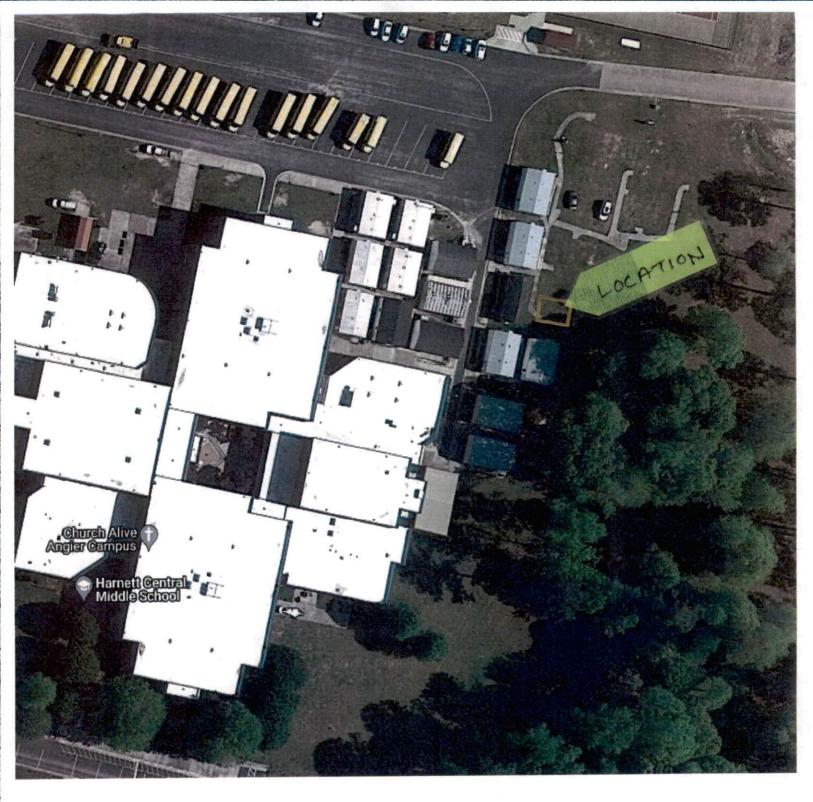
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This application to be filled out when applying for a septic system inspection.

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

<u>SEI TIC</u>			
If applying	for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
{□} Acce	pted	{ Innovative { Conventional { Any	
{□} Alter	native	Other No Septic	
		the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	
{□}YES	{X} NO	Does the site contain any Jurisdictional Wetlands?	
{□}YES	{⊠} NO	Do you plan to have an <u>irrigation system</u> now or in the future?	
{□}YES	{X} NO	Does or will the building contain any drains? Please explain. No Plumbing	
{☐}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	{X} NO	Is the site subject to approval by any other Public Agency?	
{□}YES	{ズ} 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.





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

Application # ___

Harnett County Central Permitting PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

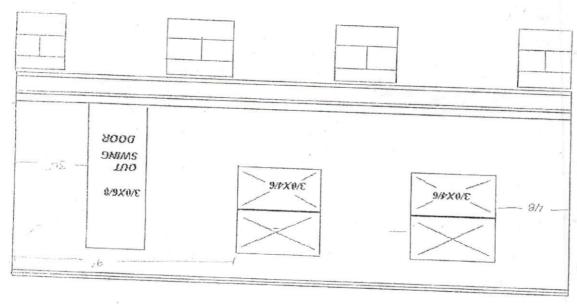
Application for Building and Trades Permit

Owner's Name: Harnett County Schools (Harnett Central Middle)	Date: 7-18-23
Site Address: 2529 Harnett Central Rd., Angier, NC 27501	Phone: 910-893-4808
Description of Proposed Work: Building Mobile Hut	3.5 N
General Contractor Information: Building Cost \$	_
Harnett County School	910-703-5275
Building Contractor's Company Name	Telephone
1500 South Main St. Lillington, NC 27546	rpope@harnett.k12.nc.us
Address	Email Address
Salund Ven	
Signature of Owner Contractor/Officer(s) of Corporation Flectrical Contractor Information: Electrical Cost	License # \$ 2,500
Description of Work Wire New Hut Service Size:	Amps #T-Poles
Harnett County Schools	919-499-7640
Electrical Contractor's Company Name	Telephone
1500 South Main. st, Lillington, NC 27546	wwester@harnett.k12.nc.us
Address	Email Address
5. Toster	L29742
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Contractor Information:	License # lost \$ 2,000
Description of Work Run Duct Work	# Units 1
J & M Heating and Air	910-897-5501
Mechanical Contractor's Company Name	Telephone
724 Turlington Rd, Dunn NC 28334	
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost S	License #
Description of Work No Plumbing	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
Insulating Inc.	919-772-9000
Insulation Contractor's Company Name & Address	Telephone

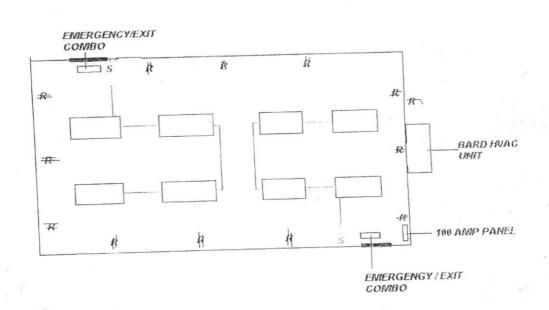
*NOTE: General Contractor must fill out and sign the second page of this application

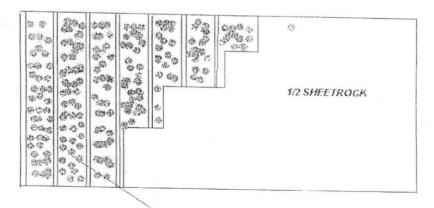


Sprinkler Contractor Information				
Sprinkler Contractor's Company Name	Telephone			
Address	Email Address			
Signature of Officer(s) of Corporation License # Fire Alarm Contractor Information				
- Hg				
Fire Alarm Contractor's Company Name	Telephone			
Address	Email Address			
Signature of Officer(s) of Corporation	License #			
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit? Yes No				
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 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 charged at full price per current fee schedule.				
Signature of Owner Contractor/Officer(s) of Corporation	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: Lough Kare	Date: 7-18-23			



OUTSIDE WALL DETAIL





R-15 INSULATION

