

Initial Application Date: 9/10/2005	Application #			
	DRB # CU #			
COMMERCIAL COUNTY OF HARNETT LAND USE APPLICA	TION			
(Phone: (910) (Mailing) PO Box 65 Lillington NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910)	893-7525 opt # 1 Fax: (910) 893-2793 www.harnett.org/permits			
LANDOWNER: 41 HOMS Mailing Address: 450	Lake Robbins Drive			
city: The Woodlands State: TX zip: 7750 Contact # 99520 84	Do Email Oliver Modsona la home com			
APPLICANT*:Mailing Address:				
City: State: Zip: Contact #*Please fill out applicant information if different than landowner				
CONTACT NAME APPLYING IN OFFICE:				
Address: 18 BOONE DOCKS DEVE, 87596 PIN:Phone #				
Zoning: Watershed: Flood: Deed Book Page: /				
Setbacks – Front: 35 ' Back: 65' Side: 10' Corner:				
PROPOSED USE:				
☐ Multi-Family Dwelling No. Units: No. Bedrooms/Unit:				
Business Sq. Ft. Retail Space: 2027 Type: O. Ff. Type: # Employ	rees: 7 Hours of Operation: 83mm-700pm			
Daycare # Preschoolers: # Afterschoolers: # Employees:	Hours of Operation:			
□ Industry Sq. Ft: # Employees:	Hours of Operation:			
□ Church Seating Capacity: # Bathrooms:	Kitchen:			
□ Accessory/Addition/Other (Sizex) Use:				
Water Supply: County Existing Well New Well (# of dwellings using well (Need to Complete New Well Applied to Complete New Well (# of dwellings using well (New Well (# of dwellings using well) (New Well (# of dwellings using well	*Muct boyo operable water by			
Sewage Supply: X New Septic Tank Expansion Relocation Services Septic Tank Expansion Relocation Sep				
(Complete Environmental Health Checklist on other side of application if Septic Comments:				
If permits are greated leaves to the first transfer of the first t				
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.				
Oliver Hudson	4/10/25			
Signature of Owner or Owner's Agent	Date			

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

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

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"

SEPTIC			
If applying	for authorizatio	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
{}} Acce	epted	{}} Innovative {} Conventional {} Any	
{}} Alter	native	{}} Other	
The applica question. If	nt shall notify f the answer is	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?	
{X}YES	{}} NO	Does or will the building contain any drains? Please explain.	
{}}YES	$\{X\}$ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?	
{}}YES	$\{\underline{X}\}$ NO	Is any wastewater going to be generated on the site other than domestic sewage?	
{}}YES	$\{\underline{\mathcal{X}}\}$ NO	Is the site subject to approval by any other Public Agency?	
XYYES	{_}} NO	Are there any Easements or Right of Ways on this property?	
{}}YES	{ ¼ } №	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 420 McKinney Pkwy Lillington, NC 27546 PO Box 65 Lillington, NC 27546

PO Box 65 Lillington, NC 27546 910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL **Application for Building and Trades Permit** LGI Homes Owner's Name: Site Address: Directions to job site from Lillington: Hom Lillington Lot: Description of Proposed Work: New Construction - Information Center Unheated SF 700 Heated SF General Contractor Information: Building Cost \$ \$200,000 LGI Homes 919-520-8406 Building Contractor's Company Name Telephone 1450 Lake Robbins Drive, The Woodlands, TX 77380 oliver.hudson@lgihomes.com Address **Email Address** Oliver Hudson 74803 Signature of Owner/Contractor/Officer(s) of Corporation License # Electrical Contractor Information: Electrical Cost \$ 6700 Description of Work New Construction Service Size: 200 Amps #T-Poles J. Crabtree Electric 919-667-1600 Electrical Contractor's Company Name Telephone 103 Fleming St., Creedmoor, NC 27522 i.crabtreeinc.com Address **Email Address** 20925 Signature of Owner/Contractor/Officer(s) of Corporation License # Mechanical Contractor Information: Mechanical Cost \$ 700 Description of Work New Construction # Units * Caryl Mechanical 704-882-4522 Mechanical Contractor's Company Name Telephone 5910 Stockbridge Drive, Monroe, NC 28110 lbyrd@carylmechanicals.com Address Email Address 16647 Signature of Owner/Contractor/Officer(s) of Corporation License # Plumbing Contractor Information: Plumbing Cost \$ 5605 Description of Work New Construction # Baths 2 Romanoff Plumbing 919-615-1947 Plumbing Contractor's Company Name Telephone 2428 Reliance Ave, Apex, NC27539 Address Email Address 29022 Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Prime Energy Group
Insulation Contractor's Company Name & Address

919-821-3288 Telephone

Sprinkler Contractor Information			
Sprinkler Contractor's Company Name	Telephone		
Address	E 2001		
Address	Email Address		
Signature of Officer(s) of Corporation Fire Alarm Contractor Information	License #		
Fire Alarm Contractor information	<u>n</u>		
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? X 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.			
Oliver Hudson	4102025		
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 OwnerX 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.			
X 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.			
Company or Name: LGI Homes			
Sign w/Title: Oliver Hudson Sr. Construction Manage	ger		