

COMMERCIAL LAND USE APPLICATION

SITE ADDRESS: 181 Mittie Haddock Dr Cameron NC 28526 PIN: 039568-0094-06

LANDOWNER: H.M. Kids / GCMMA, LLC Mailing Address: 2709 Thorngrove Ct

City: Fayetteville State: NC Zip: 28303 Phone: 910-864-3232 Email: daxd@cc-sprop.com

*Please fill out applicant information if different than landowner.

APPLICANT: Commercial Construction Contractors Mailing Address: 584 Executive Pl suite 102

City: Fayetteville State: NC Zip: 28305 Phone: 910-303-7683 Email: ccc@cccbuildnc.com

PROPOSED USE:

- Multi-Family Dwelling:** # Units: _____ # Bedrooms/Unit: _____
- Business:** SQ. FT.: Retail Space: 11000 Type: office # Employees: 16 Hours of Operation: 8-5 pm
- Daycare:** # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry:** SQ. FT.: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church:** Seating Capacity: _____ # Bathrooms: _____ Kitchen: Yes No
- Sign:** (Size _____ x _____) Type: _____ Illuminated: Yes No If yes, Internal External
- Accessory/Addition/Other:** (Size _____ x _____) Use: _____

UTILITIES:

Water Supply: County Existing Well New Well (# of facilities using well _____)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer

(Complete Environmental Health Checklist on other side of application if Septic is selected)

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



Signature of Owner or Owner's Agent

3-20-26
Date

Permits are valid for 6 months from the issue date, or 12 months from last inspection once inspections have been initiated. It is the owner/applicant's 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.

Environmental 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 permit shall become invalid. This permit will be valid for 60 months.

NEW SEPTIC SYSTEM INSPECTION

- **All property irons must be made visible.** Place **pink flags** on each corner of lot & approximately every 50 feet between corners.
- Place **orange flags** at the corners of each proposed structure per site plan submitted to Central Permitting.
- Post **orange** Environmental Health sign in location that is visible from road to assist in locating property.
- If property is thickly wooded, you will be required to 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.**

EXISTING TANK INSPECTION

- Follow above instructions for placing flags and sign on property.
- Prepare for inspection by removing soil over **outlet end** of tank, lift lid straight up (*if possible*), and then **put lid back in place.**
- ***Does not apply to septic tank in a mobile home park***
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**

SEPTIC CHECK LIST

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 rights-of-way 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. I understand that a \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot is confirmed to be ready.



 Signature of Owner or Owner's Agent

3-30-26

 Date



CentralPermitting@Harnett.org
 (910) 893-7525 ext:1
 420 McKinney Pkwy (physical)
 PO Box 65 (mailing)
 Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

CONSTRUCTION TYPE: Residential Non-Residential

SITE ADDRESS: 181 Mittie Haddock Dr Cameron NC 28326 PIN: _____

LANDOWNER: ^{owner} H.A. KIDS / GCMMB LLC ^{leasing agent} Mailing Address: 2709 Thorngrove Ct

City: Fayetteville State: NC Zip: 28303 Phone: 910-864-3232 Email: BrianA@c-prop.com

JOB COST (required): \$ 21,000.00

DESCRIPTION OF WORK: Install new 200A service and extend existing wiring into new panel

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other _____
 Electrical: 200 Amp Greater than 200 Amp Service Change Service Reconnect Other _____
 Plumbing: Water Tap/Sewer Connection Water Heater Number of Fixtures _____ Other _____

CONTRACTOR INFORMATION

** Must be owner or licensed contractor. Address, company name & phone must match information on license.*

Rowe's Electric
 Contractor's Company Name
1457 Hayes Rd Spring Lake NC 28390
 Address
7510-U
 License #

910.835.4033
 Phone
chris.roweelect@yahoo.com
 Email

Mechanical change outs & generator applications require both electrical & mechanical information. If applicable:

Commercial Construction Contractors
 Contractor's Company Name
584 Executive Place Suite 102 Fayetteville
 Address
NC 28305
105030
 License #

910-303-7683
 Phone
ccc@cccbuildnc.com
 Email

I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf.** If doing the work as owner, I understand that I cannot rent, lease, or sell the listed property for 12 months after completion of the listed work.

Christopher B Rowe
 Signature of Owner/Contractor

3.8.26
 Date



SPRINKLER CONTRACTOR INFORMATION

Sprinkler Contractor's Company Name

Address

License #

Phone

Email

Signature of Owner/Contractor/Officer of Corp.

FIRE ALARM CONTRACTOR INFORMATION

Fire Alarm Contractor's Company Name

Address

License #

Phone

Email

Signature of Owner/Contractor/Officer of Corp.

Driveway Access - NC Department of Transportation Driveway Access/Permit? YES NO

I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

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

Michael
Signature of Owner/Contractor/Officer of Corp.

3-31-26
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

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

Has 3 or more employees and has obtained workers' compensation insurance to cover them,

Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

Has no more than 2 employees and no subcontractors,

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

Michael
Signature of Owner/Contractor/Officer of Corp.

3-20-2026
Date



Fire Marshal Division

P.O. Box 370
Lillington, NC 27546
910-893-7580

Application for Plan Review

Permit Type: _____

Date Received: _____ Received By: _____

Name of Project: Unit 181 - First Command

Physical Address of Project: 181 Mittie Haddock Dr Cameron NC 28326

Plans Submitted By: Commercial Construction Contractors

Project Phone: (910)-303-7683

Contact Person/Address: Chuck Taylor

584 Executive Pl Suite 102 Fayetteville NC 28305

Contact Phone: (910)-303-7683 (910)-849-6034

Contractor's Name/Info: Commercial Construction Contractors

584 Executive Pl Suite 102 Fayetteville NC 28305

Contractor's Phone: (910)-303-7683

Contact Email: ccc@cccbuildnc.com

- Plans that are submitted will be reviewed as quickly as possible with an average time of review between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <http://htweb.harnett.org/Click2GovBP/Index.jsp> or by calling the Harnett County Central Permitting Office (910-893-7525 : Opt. 2), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.