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Initial Application Date:_	1	0	11	l	D

Application # BRES 1807 - 0046

COUNTY OF HARNETT DEMOLITION APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits
On the space of
City: DCOOLEDC State: 1 Zip TOScontact # 10-391-89 Chail: 14
Sman
APPLICANT . Servit
City: State: Zip: Contact # Email: *Please fill out applicant information if different than Jandowner
CONTACT NAME APPLYING IN OFFICE: EJ WONGCK Phone #400-111-4519
PROPERTY LOCATION: Subdivision: Lot #:Lot Size:
State Road #State Road Name:Map Book&Page:
Parcel: 139691 005 1 PIN-91091 31 01 10.000
Zoning: R430 Flood Zone: X Watershed: NO Deed Books Rage: 900, 317
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
SASYON TO TYTHES PACEBOOK TOCK
Structure(s) to be demolished & removed: Single family dwelling Manufactured Home Other (specify)
Structure(s) to be demolished & removed: Single family dwellings Manufactured Homes Other (specify)
Structures (existing and/or proposed). Single family dwellings manadatared version exist (speed).
Water Supply: () County () Existing Well
Sewage Supply: (Existing Septic Tank () County Sewer
* If a new structure is to be replaced on this lot, please ensure that existing septic system is not damaged.
* If an existing well is on site and is to be discontinued, please contact Harnett County Environmental Health for assistance.
*Upon the issuance of the Certificate of Compliance, the Harnett County Tax Department shall be notified of the removal to
ensure proper listing.
*The demolition contractor is responsible for submitting verification of proper disposal prior to the Final inspection.
PLEASE NOTEFailure to completely demolish, remove, and clear the premises will result in the withholding of the Certificate
of Compliance. Thus, future permits for the property will be denied, and fines may be imposed for failure to complete demolition/
removal.
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.
I nereby state that foregoing statements are accurate and correct to the best of my knowledge. Fermit subject to revealed in large minimates to provide
Canque 110110
Signature of Owner or Owner's Agent **This application expires 6 months from the initial date if no permits have been issued**
title abbusante arbusa a manna nam ma man ma la

Asbestos requirements are or if mul	e applicable if the tiple structures a	e occupancy use is or are being demolished	r changes to Commercial (n & removed at one time.	ot residential),
demolish any building including	residences demolis	shed for commercial or inc of Health and Human Se	os Inspector must be provided dustrial expansion or structures. I rvices Division of Public Health gin whether or not the building is	t is the contractor's - Health Hazards
I hereby certify that the in	nformation on this	application is correct ar	nd that all work in connection v	with the above
	100		work complies with the require	
State Building Codes and CONTRACTOR PPLICAN	Q	DATE	Call for inspection at proper st	
Please contact the Departme http://www.epi.state.nc.us/ep			requirements and permit infor	mation.
demolish any building including responsibility to properly notify Control Unit at least ten (10) vasbestos. I hereby certify that the interest of the Building Codes and CONTRACTOR APPLICANT APPLICANT CONTRACTOR CO	residences demolise the Department of Health and H	application is correct are pervision and that such lett County Ordinances. DATE DATE	dustrial expansion or structures. Invices Division of Public Health gin whether or not the building is and that all work in connection work complies with the require Call for inspection at proper states. LICENSE NO. (If applied to the content of	It is the contractor's Health Hazards s known to contain with the above ements of the NC tage of work. Cable)

151	Harnett	BUILDING RESIDENTIAL	PERMIT NUMBER
14	4 1 of 1 ▶ ▶	Find Next 🖳 🕶	
En	ter Permit Number BRES1807-0046		View Report



910-893-7525

www.harnett.org

<u>PERM</u>	IT	Nι	JM	<u>BER</u>
BRES	18	07	-00	046

JOB ADDRESS: 12105 US 421 N	PERMIT SUBTYPE: DEMOLITION		PARCEL NO: 9691-23-6770.000	
DESCRIPTION:	DATE ISSUED:	E ISSUED: DATE EXPIRED:		
PLAN NAME:	ZONING DISTRICT: RA-30 - 0.24 acres (100.0%)			
ADDITIONAL MACHELLI CADI MAYATE	Т.			
APPLICANT: MCNEILL CARL WAYNE		PHONE:		
12105 US 421 N BROADWAY, NC 27505 BROADWAY, NC 27505		EMAIL:		
CONTRACTOR:	F	HONE:		
i .		EMAIL:		
OWNER: MCNEILL CARL WAYNE		PHONE:		
12105 US 421 N BROADWAY, NC 27505 BROADWAY, NC 27505		EMAIL:		

REQUIRED INSPECTIONS				
INSPECTION TYPE APPROVAL DATE COMMENTS				
ZONING				

Harnett County Development Services P.O. Box 65, 108 E Front St Lillington NC 27546



Cash Register Receipt Harnett County

Receipt Number R293

DESCRIPTION		10000000000000000000000000000000000000	QТ Y	PAID
PermitTRAK				\$75.00
BRES1807-0046	Address: 12105 US 421 N	APN: 9691-23-6770.000		\$75.00
DEMOLITION F	EES			\$75.00
DEMO	LITION RESIDENTIAL		0	\$75.00
TOTAL FEES PAID BY	RECEIPT: R293		1	\$75.00

Date Paid: Friday, July 27, 2018 Paid By: Country Fair Homes

Cashier: LL

Pay Method: CREDIT CARD 30989

