

Initial Application Date: 10/8/18

Application # BRES1810-0030

CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 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: Dennis & Kathy Galbraith Mailing Address: 2540 Darroch Rd.  
City: Lillington State: NC Zip: 27546 Contact No: (805) 338-1428 Email: kathylynn@galbraith@gmail

APPLICANT: Rising Sun Pools Mailing Address: 5608 Hillsborough St

City: Raleigh State: NC Zip: 27606 Contact No: 919.851.9700 Email: holly@risingsunpools.com

CONTACT NAME APPLYING IN OFFICE: Holly Smith Phone # (919) 306-0599

ADDRESS: 2540 Darroch Rd PIN: 0527-41-2218.000

DEED OR OTP: 3028:952

PROPOSED USE:

- SFD: (Size \_\_\_x\_\_\_) # Bedrooms:\_\_\_ # Baths:\_\_\_ Basement(w/wo bath):  Garage:  Deck:  Crawl Space:  Slab:  Monolithic Slab:   
(Is the bonus room finished?  yes  no w/ a closet?  yes  no (if yes add in with # bedrooms)
- Mod: (Size \_\_\_x\_\_\_) # Bedrooms\_\_\_ # Baths\_\_\_ Basement (w/wo bath)  Garage:  Site Built Deck:  On Frame  Off Frame   
(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: \_\_\_\_\_
- Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: \_\_\_\_\_
- Addition/Accessory/Other: (Size 20 x 44) Use: inground pool w/poured concrete patio Closets in addition?  yes  no

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.

Holly Smith Signature of Owner or Owner's Agent 10/8/18 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

**\*\*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.**

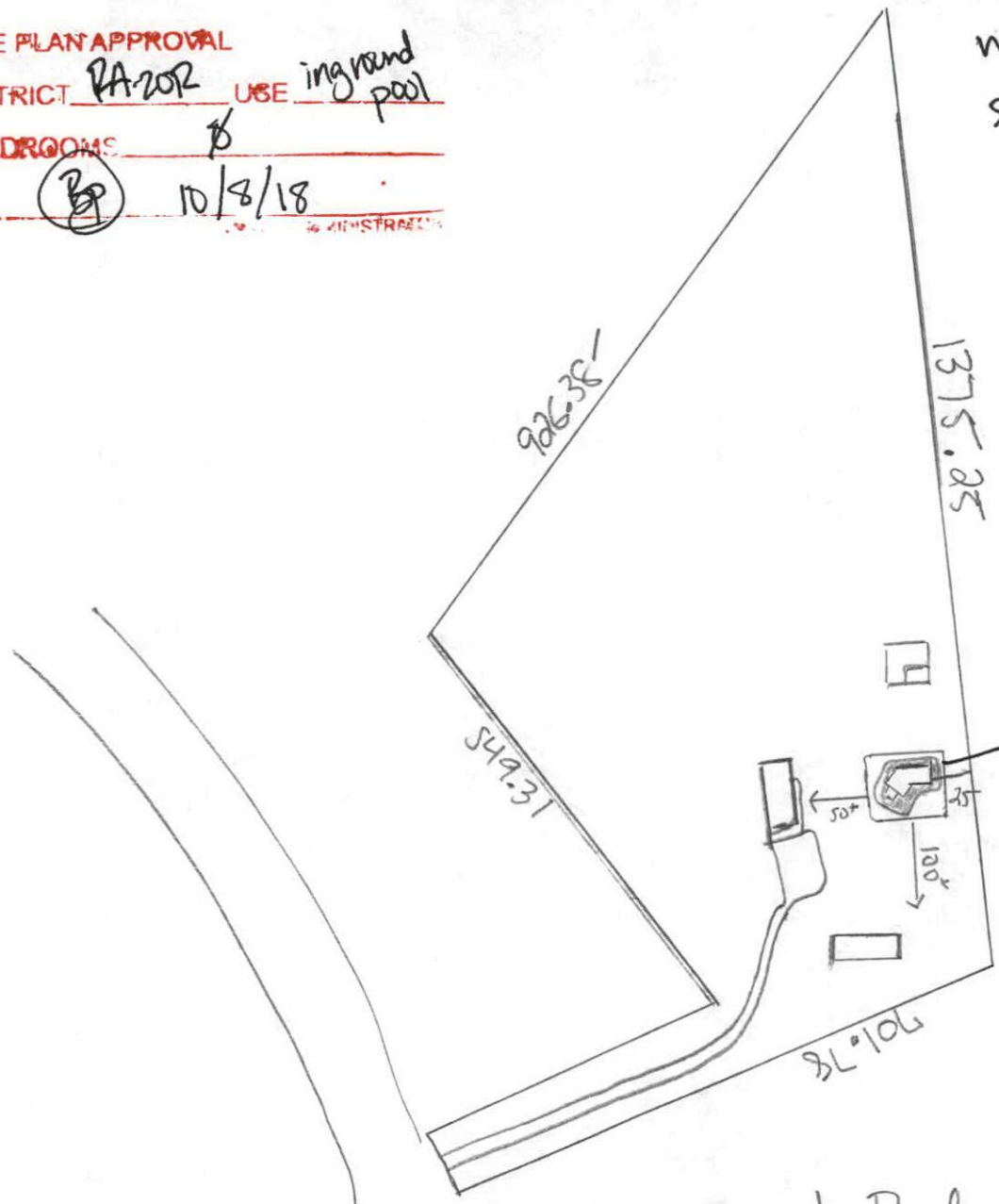
SITE PLAN APPROVAL

DISTRICT RA-202 USE inground pool

#BEDROOMS 8

BP 10/8/18

\* Water will be disposed of on property without threat to adjacent lots or streets.



ISPA

- House - 2280
- Building 1 - 1100
- Building 2 = 400
- Drive/walk = 900

Total 4680 ☑

proposed pool patio - 3225 ☑

proposed total = 7905 ☑

2540 Darroch Rd  
Lillington 27546

11. I have been advised that when  
the number of members is small  
as the case

DATE FROM APPLICANT  
DISTRICT OFFICE  
REGISTRATION NO. 123456789  
12/12/2023

11

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

**Application for Residential Building and Trades Permit**

Owner's Name: Dennis & Kathy Galbraith Date: 10/8/18  
Site Address: 2540 Darroch Rd. Lillington 27546 Phone: (805)338-1428  
Directions to job site from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_  
Heated SF: \_\_\_\_\_ Unheated SF: \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_

**General Contractor Information**

Rising Sun Pools Homeowner (805)338-1428  
Building Contractor's Company Name Telephone  
2540 Darroch Rd. Lillington KathyLynnGalbraith@gmail.com  
Address Email Address  
69887 homeowner  
License #

**Electrical Contractor Information**

Description of Work Wire pool Service Size: 100 Amps T-Pole: Yes  No  
Harte Pool Wiring & Lighting (919)8108-8195  
Electrical Contractor's Company Name Telephone  
7424 US 55 S Willow Springs 27592 harte pool wiring and lighting  
Address Email Address @ gmail.com  
30707  
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.

*Hally Smith*

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

Date

10/8/18

**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.

Company or Name: \_\_\_\_\_

Sign w/Title: \_\_\_\_\_ Date: \_\_\_\_\_

HARNETT COUNTY TAX ID#

01-0527-0011-01

8/30/12 BY 813

FOR REGISTRATION  
Kimberly S. Hargrove  
REGISTER OF DEEDS  
Harnett County, NC  
2012 AUG 30 04:52:55 PM  
BK:3028 PG:532-553  
FEE: \$25.00  
EXCISE TAX: \$300.00  
INSTRUMENT # 2012013992  
TWESTER



2012013992

Revenue \$300.00

Recording Time, Book and Page

Tax Lot No.

Parcel Identifier No. 01-0527-0011-01 Verified by Harnett County on the \_\_\_ day of \_\_\_, 20\_\_ by \_\_\_\_\_

Mail after recording to Single Source Real Estate Services, Inc. File No. 31626-12DB-HM  
This instrument was prepared by: K. Douglas Barfield

Brief Description for the index

2540 Darroch Road

### NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 20<sup>th</sup> day of August, 2012, by and between

GRANTOR

GRANTEE

Brett A Snyder and wife Elizabeth J Snyder

Dennis D. Galbraith and wife, Kathy L. Galbraith

2540 Darroch Road  
Lillington NC 27546

2540 Darroch Road  
Lillington, NC 27546

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g., corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in or near the City of Lillington, Anderson Creek Township, Harnett County, NC and more particularly described as follows:

Being all of Lot TRACT II (10.75 AC), in a subdivision known as SURVEY & LOT RECOMBINATION FOR THOMAS B. JACKSON AND ANDREW J. KNELL, according to a plat of same being duly recorded in Book of Plats Cabinet E, and Page Slide 450-B, Harnett County Registry, North Carolina.

Parcel Identification No.: 01-0527-0011-01

All or a portion of the property herein conveyed  includes or  does not include the primary residence of a Grantor.

UNRECORDED

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2624, Page 607.

A map showing the above described property is recorded in Plat Book Cabinet F, Page Slide 450-B.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

Subject to restrictions, easements and rights of way of public record.

Subject to ad valorem taxes for the year 2013 which are a lien but not yet due and payable.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

\_\_\_\_\_ (Corporate Name)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

State of Alaska  
 County of Mat Su

I, Paula A LaBreck, a notary public of said county and state, do hereby certify that Brett A Snyder and wife Elizabeth J Snyder personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes herein expressed.

Witness my hand and official seal this the 20<sup>th</sup> day of August, 2013.

Paula A LaBreck  
 Notary Public

My commission expires 2/14/2013

The foregoing Certificate(s) of \_\_\_\_\_ is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

By \_\_\_\_\_ REGISTER OF DEEDS FOR \_\_\_\_\_ COUNTY Deputy/Assistant-Register of Deeds.

Notary Public  
 Paula A. LaBreck  
 State of Alaska  
 My Commission Expires 2/14/2013