



Initial Application Date: 11/7/18

Application # BRES1811-0024

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: Timothy S. Smith Mailing Address: 10 W. Christian Ct.
City: Angier State: NC Zip: 27501 Contact No: 919-524-1238 Email: timmy.smith@sas.com

APPLICANT*: Same Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Timothy Smith Phone # 919-524-1238

ADDRESS: 10 W. Christian Ct. Angier NC 27501 PIN: 0682-71-0658.000

DEED OR OTP: 1089 / 6880

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 26' x 24') Use: Finishing bonus room 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.

Timothy S. Smith
Signature of Owner or Owner's Agent

11-7-18
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

strong roots • new growth

strong roots • new growth

****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? - *Existing*
 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.



Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

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

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

Application for Residential Building and Trades Permit

Owner's Name: Timothy S. Smith Date: 11-7-18
Site Address: 10 W. Christian Ct. Angier, NC. 27501 Phone: 919-524-1238
Subdivision: Homestead Lot: 31
Description of Proposed Work: Finishing bonus room over garage

General Contractor Information

Timothy S. Smith 919-524-1238
Building Contractor's Company Name Telephone
10 W. Christian Ct. Angier, N.C. 27501 Timmy.smith@sas.com
Address Email Address

License # _____

Electrical Contractor Information

Description of Work: Trim out electrical Service Size: _____ Amps T-Pole: Yes No
Timothy S. Smith 919-524-1238
Electrical Contractor's Company Name Telephone
10 W. Christian Ct. Angier, NC 27501 Timmy.smith@sas.com
Address Email Address

License # _____

Mechanical/HVAC Contractor Information

Description of Work: Installing split system
Timothy S. Smith 919-524-1238
Mechanical Contractor's Company Name Telephone
10 W. Christian Ct. Angier, NC. 27501 Timmy.smith@sas.com
Address Email Address

License # _____

Plumbing Contractor Information

Description of Work: Trim out bathroom # Baths: 1
Timothy S. Smith 919-524-1238
Plumbing Contractor's Company Name Telephone
10 W. Christian Ct. Angier, N.C. 27501 Timmy.smith@sas.com
Address Email Address

License # _____

Insulation Contractor Information

Timothy S. Smith 919-524-1238
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.

Timothy J. Smith
Signature of Owner/Contractor/Officer(s) of Corporation

11-7-18
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: Timothy J. Smith

Date: 11-7-18

HARNETT COUNTY

9503018 ³⁻²⁰⁻⁹⁵ 3-20-95



36.00
\$36.00

Real Estate
Excise Tax

Excise Tax

36⁰⁰

FILED
BOOK 1089 PAGE 686-687

'95 MAR 17 PM 2 33

GAYLE P. HOLDER
REGISTER OF DEEDS
HARNETT COUNTY, NC

Recording Time, Book and Page

Tax Lot No. _____ Parcel Identifier No. 04-0682-0035
Verified by _____ County on the _____ day of _____, 19____
by _____

Mail after recording to Henry M. Pleasant, P.O. Drawer 220, Angier, N.C. 27501

This instrument was prepared by Henry M. Pleasant, Attorney

Brief description for the Index Lot 31, Homestead II

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 17 day of March, 19 95, by and between

GRANTOR

Kingsley Properties, Inc.
1151 Kildare Farm Rd.
Cary, NC 27511

GRANTEE

Timothy S. Smith
and wife,
Tara P. Smith
Rt 3, Box 12655
Angier, NC 27501

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 the City of _____, Black River Township, _____ Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot 31, of the Homestead II, as shown on map recorded in Plat Cabinet F, Slide 346-D, of the Harnett County Registry.

TRUSTEE RECORDED IN THE
OF _____

ONE of parcel # 04-0682-0035

BY

The property hereinabove described was acquired by Grantor by instrument recorded in

A map showing the above described property is recorded in Plat Book PC#F page Slide 346-D

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:

This property is subject to Protective Covenants as recorded in Book 1084, page 710, of the Harnett County Registry.

HARNETT COUNTY, N. C.
FILED DATE 3-17-95 TIME 2:33pm
BOOK 1089 PAGE 1086-1087
REGISTER OF DEEDS
BAYLE P. HOLDER



Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its name by its authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first written above.
KINGSLEY PROPERTIES, INC.
Corporate Name
Secretary (Corporate Seal)
Margaret Kingsley
USE BLACK INK ONLY
(SEAL)
(SEAL)
(SEAL)
(SEAL)

SEAL-STAMP NORTH CAROLINA, Harnett County.
I, a Notary Public of the County and State aforesaid, certify that _____ Grantor, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this _____ day of _____, 19____.
My commission expires: _____ Notary Public

SEAL-STAMP NORTH CAROLINA, Harnett County.
I, a Notary Public of the County and State aforesaid, certify that Margaret Kingsley Secretary of Kingsley Properties, Inc. a North Carolina corporation, and that by authority duly given and as the act of the corporation, the foregoing instrument was signed in its name by its _____ as its president, sealed with its corporate seal and attested by _____ as its _____ Secretary. Witness my hand and official stamp or seal, this 17 day of March, 1995.
My commission expires: 7-31-96 Notary Public



The foregoing Certificate(s) of Tina J. Arrington - Notary for Harnett Co. 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 Bayle P. Holder REGISTER OF DEEDS FOR Harnett COUNTY
Kathy Coleman Deputy/Assistant Register of Deeds