



Initial Application Date: 12/28/18

Application # BRES1812-0034

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: Bruno E. Rosales Mailing Address: 215 Kentucky Derby Ln  
City: Lillington State: NC Zip: 27546 Contact No: (240) 486-6176 Email: brunylili@gmail.com

APPLICANT\*: Bruno Elio Rosales Mailing Address: 215 Kentucky Derby Ln

City: Lillington State: NC Zip: 27546 Contact No: 240 467-4757 Email: bruniylili@gmail.com

\*Please fill out applicant information if different than landowner  
CONTACT NAME APPLYING IN OFFICE: Bruno E. Rosales Phone # 240 486-6176

ADDRESS: 215 Kentucky Derby Ln PIN: 0509-04-5310.000

DEED OR OTP: 3543; 0880

**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 286" x 28'6") Use: finish unfinished room (attic) 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.

[Signature] Signature of Owner or Owner's Agent 12/27/18 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



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**\*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!**

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strong roots • new growth



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: \_\_\_\_\_ Date: \_\_\_\_\_

Site Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Proposed Work: \_\_\_\_\_

General Contractor Information

X N/A Building Contractor's Company Name Homeowner Address

(240) 486-6176 Telephone brunylili@gmail.com Email Address

License # \_\_\_\_\_

Electrical Contractor Information

X N/A Description of Work Electrical Contractor's Company Name Homeowner Address

Service Size: \_\_\_\_\_ Amps T-Pole: [ ] Yes [ ] No (240) 486-6176 Telephone brunylili@gmail.com Email Address

License # \_\_\_\_\_

Mechanical/HVAC Contractor Information

Description of Work \_\_\_\_\_

Mechanical Contractor's Company Name Address

Telephone Email Address

License # \_\_\_\_\_

Plumbing Contractor Information

Description of Work Plumbing Contractor's Company Name Address

# Baths Telephone Email Address

License # \_\_\_\_\_

Insulation Contractor Information

X N/A Insulation Contractor's Company Name & Address Homeowner

(240) 486-6176 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.

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

12-29-18  
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: [Signature]

Date: 12-28-2018

28'6"

add - AC Room

10'8" Closet

5'4"

5'4"

add walls

add walls

25'6"

25'6"

6'

9'

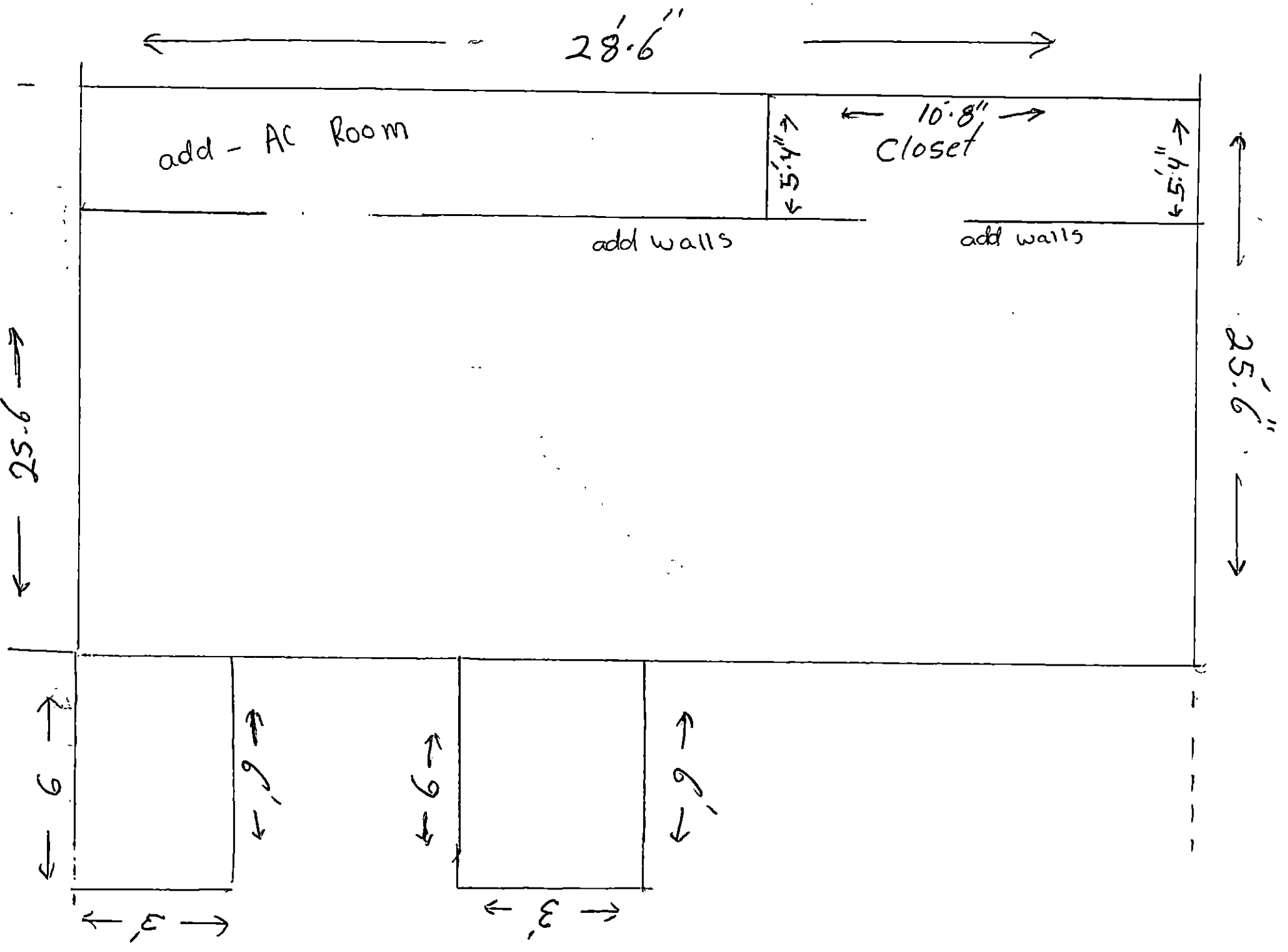
6'

6'

4'

3'

\*





Harnett County Web Site

### Harnett County Cama Webviewer - Real Estate Search

Basic Search | **Real Estate Search** | Help

Hide Details

Owner Last Name: \_\_\_\_\_ Owner First Name: \_\_\_\_\_ Account #: \_\_\_\_\_

TWP MAP SB BK LOT DV UD CC PIN# \_\_\_\_\_

House # Unit # Direction Street Name Type Suffix Municipality  
Property Address: 215 \_\_\_\_\_ Kentucky Derby LN \_\_\_\_\_ Search Clear

Advanced Search

### Search Results [click on a parcel number below to continue](#) Hide Details

Parcel #	Buildings	Property Address	Account #	Owner Name	Owner Name	Unit/Type	Legal Description	PIN#
030507 0200 21	1	215 KENTUCKY DERBY LN LILLINGTON	1500024738	ROSALES BRUNO E	ENRIQUEZ-ROSALES LILIA	1.000 LT	LOT#107 TROTTERS RIDGE PH1B 0.46AC MAP#2011-75	0507-04-5310.000

### Selected Parcel Info

Hide Details

Parcel #: 030507 0200 21	PIN#: 0507-04-5310.000	Neighborhood: 00333 - TROTTERS RIDGE	Building Value: 198,390
Account #: 1500024738	Legal Description: LOT#107 TROTTERS RIDGE PH1B 0.46AC MAP#2011-75	Land Units: 1.000	Outbuilding Value: 1,530
Owner Name: ROSALES BRUNO E & ENRIQUEZ-ROSALES LILIA			Land Value: 32,000
Exempt:			Parcel Value Total: 231,920
Exemptions:			Deferred Value: 0
			Taxable Value: 231,920

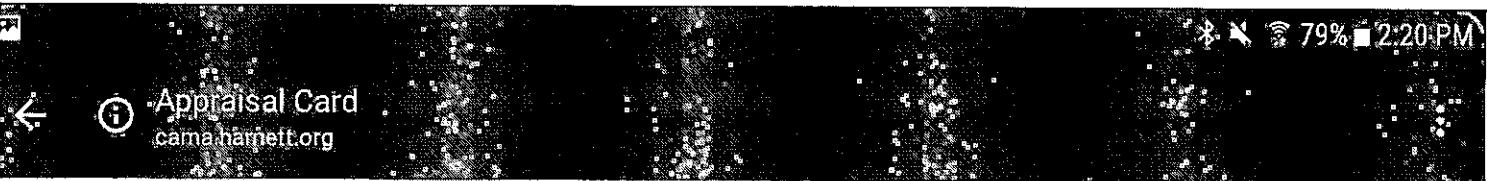
Land | Building | OBXF | Sales | Property Record Cards | Owners | Tax Codes

MARKET LAND	Land Use	Use Code	Zoning	Frontage	Depth	Depth Factor	Land Model	Condition Factor	Adjustments +RF+AC+LC+10+OT	Road Type	Unit Price	Units	Unit Type	Total Adjustment	Adjusted Unit Price	Land Value	Notes	EX1
	SFR	0100	RA-20R	0	0	1.00	0	1.0000			32,000.00	1.000	LT	1.000	32,000.00	32,000.00		
<b>Total Market</b>				0								1.000				32,000.00		

All information on this site is prepared for the inventory of real property found within Harnett County. All data is compiled from recorded deeds, plats, and other public records and data. Users of this data are hereby notified that the aforementioned public information sources should be consulted for verification of the information. All information contained herein was created for the Harnett County's internal use. Harnett County, its employees and agents make no warranty as to the correctness or accuracy of the information set forth on this site whether express or implied, in fact or in law, including without limitation the implied warranties of merchantability and fitness for a particular use. If you have any questions about the data displayed on this website Harnett County Tax Dept, [vebtax@harnett.org](mailto:vebtax@harnett.org)

For technical problems related to this website, Harnett County IT Dept, [webinfo@harnett.org](mailto:webinfo@harnett.org)

1.7.96.274



HARNETT COUNTY CAMA WEBVIEWER

12/27/2018 2:20:37 PM

ROSALES BRUNO E ENRIQUEZ-ROSALES LILIA

Return/Appeal Parcel: 03-0507-

Notes: -0200--21

PLAT: UNIQ ID

2011775 281779

ID NO: 0507-04-5310.000

SPLIT FROM ID

231920

215 KENTUCKY DERBY LN LILLINGTON NC 27546

CARD NO. 1

of 1

1.000 LT

TW-03

SRG= Inspection

CI-FR-EX- AT-

LAST ACTION

20170925

1500024738

BENHAVEN FIRE ADVALOREM TAX (100), BENHAVEN RESCUE ADVL TAX (100), COUNTY WIDE ADVALOREM TAX (100), SOLID WASTE FEE SOLID WASTE (1)

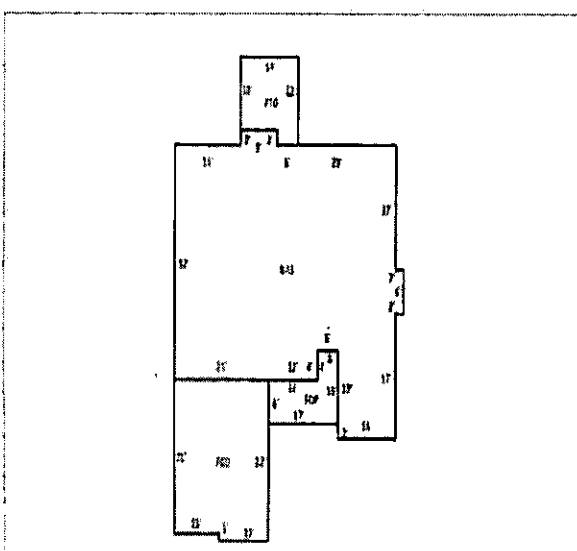
Reval Year: 2017 Tax Year: 2019

LOT#107 TROTTERS RIDGE PH1B 0.46AC MAP#42011-75

Appraised by 14 on 01/01/2017 00333 TROTTERS RIDGE

CONSTRUCTION DETAIL	MARKET VALUE	DEPRECIATION	CORRELATION OF VALUE
Foundation - 4		Standard 0.06000	
Spread Footing	5.00		CREDENCE TO MARKET
Sub Floor System - 3			DEPR. BUILDING VALUE - CARD
Slab Above Grade	6.00		DEPR. OB/XF VALUE - CARD
Exterior Walls - 10			MARKET LAND VALUE - CARD
Aluminum/Vinyl Siding	30.00		TOTAL MARKET VALUE - CARD
Roofing Structure - 03			TOTAL APPRAISED VALUE - CARD
Gable	8.00		TOTAL APPRAISED VALUE - PARCEL
Roofing Cover - 03			TOTAL PRESENT USE VALUE - PARCEL
Asphalt or Composition Shingle	3.00		TOTAL VALUE DEFERRED - PARCEL
Interior Wall Construction - 5			TOTAL TAXABLE VALUE - PARCEL \$
Drywall/Sheetrock	20.00		
Interior Floor Cover - 06			
Sheet Vinyl	6.00		
Interior Floor Cover - 14			
Carpet	0.00		
Heating Fuel - 04			
Electric	1.00		
Heating Type - 10			
Heat Pump	4.00		
Air Conditioning Type - 03			
Central	4.00		
Bedrooms/Bathrooms/Half-Bathrooms			
4/3/0	16.000		
Bedrooms			
BAS - 3 FUS - 1 LL - 0			
Bathroom			
BAS - 2 FUS - 1 LL - 0			
Half-Bathrooms			
BAS - 0 FUS - 0 LL - 0			
Office			
BAS - 0 FUS - 0 LL - 0	0		
TOTAL POINT VALUE	105.000		

BUILDING ADJUSTMENTS		
Market	3	Factor 3 1.0500
Quality	3	Average 1.0000
Size	Size	0.9500
TOTAL ADJUSTMENT FACTOR		1.000
TOTAL QUALITY INDEX		105



PERMIT	
CODE	DATE
NOTE	NUMBER
AMOUNT	

SALES DATA				
OFF. RECORD BOOK	DATE	DEED TYPE	Q/U/V/W	INDICATE SALES PRICE
035430980	9 2017	WD Q I		235000
028549035	4 2011	WD Q V		32000
029180468	10 2011	WD Y V		220000

HEATED AREA 2,715

NOTES

3/4 4/14/15, corrected 2nd floor area (FUS/UUS/UAT), added OB/XF (stg & fence) for 2015.tw

SUBAREA	CODE	DESCRIPTION	COUNT	LNTH	WTH	UNITS	UNIT PRICE	ORIG % COND	BLDGF	AYB	EYB	ANN DEP RATE	OVR	% COND	OB/XF DEPR VALUE
BAS	05	WOOD FENCE	1	0	0	248	11.90	100	-	2017	2017	610		40	1180
FGD	01	STORAGE	1	14	8	1	500.00	100	-	2011	2011	55		74	350
TOTAL OB/XF VALUE															
FOP															1,630
FOP															
FUS															
PTO															
UAT															
UUS															
FIREPLACE		2 - Pre Fabricated					1,200								
SUBAREA TOTALS		4,278					211,050								

BUILDING DIMENSIONS BAS=W29N2W9S2W16S9E2E23E12N4E5S10S2E14N17E2N6W2N17Area:1850PTO=N10E14S12W5N2W9Area:160FGD=S22W12N1W11N21E23Area:495FOP  
P=W17N6E12N4E5S10W1Area:122FUS=Area:66UUS=Area:738UAT=Area:66TotalArea:4278

LAND INFORMATION																	
HIGHEST AND BEST USE	USE CODE	LOCAL ZONING	FRONT YAGE	DEPTH	DEPTH / SIZE	LNH MOD	COND. FACT	OTHER ADJUSTMENTS AND NOTES	ROAD TYPE	LAND UNIT PRICE	TOTAL LAND UNITS	UNT TYP	TOTAL ADJUST	ADJUSTED UNIT PRICE	LAND VALUE	LAND OVERRIDE VALUE	LAND NOTES
DFR	0100	RA-20R	0	0	1.0000	0	1.0000	RF AC IC TO OT		32,000.00	1.000	LT	1.000	32,000.00	32000	0	
TOTAL MARKET LAND DATA																	
TOTAL PRESENT USE DATA																	

Owner Last Name: \_\_\_\_\_ Owner First Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Parcel #: \_\_\_\_\_ PIN: \_\_\_\_\_

House #: \_\_\_\_\_ Unit #: \_\_\_\_\_ Direction: \_\_\_\_\_ Street Name: \_\_\_\_\_ Type: \_\_\_\_\_ Suffix: \_\_\_\_\_ Municipality: \_\_\_\_\_

Property Address: 215 \_\_\_\_\_ Kentucky Derby \_\_\_\_\_ LN \_\_\_\_\_ Search Clear

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Exempt:			Parcel Value Total: 231,920
Exemptions:			Deferred Value: 0
			Taxable Value: 231,920

Land Building OBXF Sales Property Record Cards Owners Tax Codes

BLDG	AYB	EYB	Heated Area	Non-Heated Area	Total Area	Appraised Value	Building Name	Property Address	Use Model	%Good	Base Rate	Replacement Cost New	Strab	Exemptions
BLDG_1	2011	2011	2,715	1,563	4,278	198,390		215 KENTUCKY DERBY LN LILLINGTON	01 01	94.0%	70.350	211,055		

Building Use/Model Descriptions

USE	Model	Historic Indicator
01 - SINGLE FAMILY RESIDENTIAL	01 - SINGLE FAMILY RESIDENTIAL	N/A

Building Adjustments

Market	Category	Code	Factor	Description	Value
Quality		3	Average		1,0000
Size			Size		0.9500

Sub Area Information

Sub Area Type	Description	Actual Area	% Of Base	Effective Area	Replacement Cost New
UAT	Attic, Unfinished	60	010	6	422
BAS	Base	1,850	100	1,850	130,148
FGD	Garage, Finished, with Door	495	045	223	15,688
PTO	Patio	150	005	8	563
FOP	Porch, Open, Finished	122	035	43	3,025
FUS	Upper Story, Finished	865	090	779	54,803
UUS	Upper Story, Unfinished	736	010	74	5,208

Structural Elements

Element	Description	Point Value	%
Air Conditioning Type	03-Central	4,000	100
Bedrooms/Bathrooms/Half-Bathrooms	4/3/0	16,000	100
Exterior Walls	10-Aluminum/Vinyl Siding	39,000	100
Fireplace	2-Pre Fabricated	1200,000	100
Foundation	4-Spread Footing	5,000	100
Heating Fuel	04-Electric	1,000	100
Heating Type	10-Heat Pump	4,000	100
Interior Floor Cover	08-Sheet Vinyl	6,000	50
Interior Floor Cover	14-Carpet	0,000	50
Interior Wall Construction	5-Drywall/Sheetrock	20,000	100
Roofing Cover	03-Asphalt or Composition Shingle	3,000	100
Roofing Structure	03-Gable	8,000	100
Sub Floor System	3-Slab Above Grade	8,000	100

Bedrooms/Bathrooms/Half-Bathrooms

	Base Area	Upper Level	Lower Level
Bathrooms	2	1	0
Bedrooms	3	1	0

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