

Initial Application Date: 5/3/19

Application # BRES1905-0018

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: Steven Eisenberg Mailing Address: 145 Baptist Grove Rd
City: FV State: NC Zip: 27526 Contact No: (919) 616-6902 Email: steven@butterhomesusa.com

APPLICANT*: Same Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

ADDRESS: 145 Baptist Grove Rd PIN: 06053-39-8073.000

Zoning: RA-30 Flood: X Watershed: WS-IV Deed Book / Page: 3499/594

Setbacks – Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

- SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ 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 25 x 25) Use: Laundry, mud, living room reno Closets in addition? () yes (X) no -all interior

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 (X) no

Structures (existing or proposed): Single family dwellings: X 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.

Steven Eisenberg Signature of Owner or Owner's Agent 5/3/19 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.

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.

Application for Residential Building and Trades Permit

Owner's Name Steven Eisenberg Date 5/3/19

Site Address 145 Baptist Grove Rd Phone (919)616-6902

Directions to job site from Lillington Head up 401 towards Fryingpan. Make left onto Chaylebeate Rd. Turn left onto Baptist Grove Rd. First house on left

Subdivision n/a Lot _____

Description of Proposed Work Living room, medroom, + laundry ^{Area} room # of Bedrooms 3

Heated SF 1600 Unheated SF _____ Finished Bonus Room? no Crawl Space Slab _____

General Contractor Information

Butler Homes LLC
Building Contractor's Company Name

(919)616-6902
Telephone

145 Baptist Grove Rd FV NC 27526
Address

steven@butlerhomesusa.com
Email Address

NC 80620
License #

Electrical Contractor Information

Description of Work Relocate Existing Power Service Size _____ Amps T-Pole Yes No

Fast Electric Service
Electrical Contractor's Company Name

(919) 201-6688
Telephone

2499 Patton Ln Franklinton NC 27525
Address

fastelectric5vc@gmail.com
Email Address

L-8223
License #

Mechanical/HVAC Contractor Information

Description of Work relocate Existing Duct work

Langley Heating + Air
Mechanical Contractor's Company Name

(336) 260-9984
Telephone

127 W. Holding Ave. Wake Forest, NC 27587
Address

kaleb@langleyheatingandair.com
Email Address

NC 32842
License #

Plumbing Contractor Information

Description of Work ~~Household 360~~ Relocate Existing Plumbing # Baths 2.5

House Hold 360
Plumbing Contractor's Company Name

(919) 414-8637
Telephone

1290 Lafayette Dr. FV, NC 27526
Address

household360@gmail.com
Email Address

P-129988
License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address

Telephone

*NOTE General Contractor 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

5/3/19
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

Company or Name Butler Homes LLC

Sign w/Title [Signature] Owner Date 5/3/19

CRITERIUM[®] GILES ENGINEERS

January 4, 2019

Butler Homes
c/o Steven Eisenberg

7334 CHAPEL HILL ROAD
SUITE 200
RALEIGH, NC 27607
PHONE 919 465-3801
FAX 919 465-3802
NC LIC. NO.: C-2871

Re: Wall Removal Letter
145 Baptist Grove Road
Fuquay Varina, NC

Dear Mr. Eisenberg,

At your request, a limited structural evaluation for removing walls in the home located at the above-mentioned address was performed on January 3, 2019. It is our understanding that you plan to remove the following sections of wall:

Wall #1 - An approximate 9'-0" section of wall (spanning right to left from the right perimeter of the home) at the right side of the home located approximately 16'-0" from the rear of the home.

Wall #2 - An approximate 20'-0" section of wall (spanning right to left starting at the left end of Wall #1) located approximately 16'-0" from the rear of the home.

Wall #3 - An approximate 10'-0" section of wall (spanning right to left starting at the left end of Wall #2).

We have provided recommendations below to remove these sections of walls. The contractor should verify all dimensions prior to ordering materials. For purposes of this report, all directions (left, right, rear, etc.) are taken from the viewpoint of an observer standing and facing the front door of the home. See attached drawing for details.

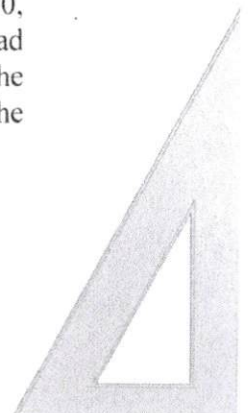
RECOMMENDATIONS

- Wall #1 - We recommend installing a new (2) 1.75"x9.25" LVL beam (E2.0, Fb=2900 PSI or equivalent) spanning a maximum of 9'-0" between the load bearing points. Alternatively, a W8x10 steel wide flange beam may be utilized. The new beam should be supported by 2-2x4 jack studs below each end above the existing foundation wall.
- Wall #2 - We recommend installing a min. (2) 1.75"x16" LVL beam (E2.0, Fb=2900 PSI or equivalent) spanning a maximum of 20'-0" between the load bearing points. Alternatively, a W8x21 steel wide flange beam may be utilized. The new beam should be supported by 5-2x4 jack studs below each end above the existing foundation wall.

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- Wall #3 - We recommend installing a (2) 1.75"x9.25" LVL beam (E2.0, Fb=2900 PSI or equivalent) spanning a maximum of 10'-0" between the load bearing points. Alternatively, a W8x10 steel wide flange beam may be utilized. The new beam should be supported by 2-2x4 jack studs below each end above the existing foundation wall.

Notes:

- The existing/new structural framing members (rafters/ceiling joists) should be attached to the new beams with Simpson LUS hangers (or equivalent).
- For the steel beam option, install new continuous 2x blocking in the web of the steel beam. The blocking should be bolted with (2) 5/8-inch diameter through-bolts at 16-inches on-center (with min. 2-inch edge distance). The existing rafters/joists should be attached to the wood blocking with Simpson LUS Hangers (or equivalent).
- New LVL beams should be positively attached to the jack studs with Simpson Post Caps or CS14 straps (24" min. length) or equivalent.
- New steel beams should be positively attached to the supporting jack studs with min. (2) 3/8-inch diameter lag screws installed through the bottom flange of the steel beams.
- Provide Simpson CS14 across ceiling joists where beam is flush mounted.
- For both LVL and steel beam options, contractor to ensure that new load bearing points are installed directly above the existing continuous 8" CMU block foundation wall. Install solid 2x blocking in the floor cavity below the new jack studs.

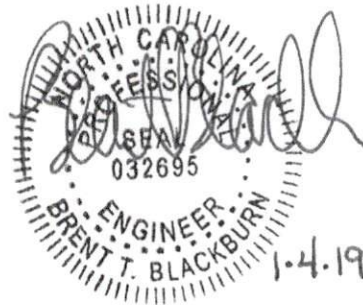
CONCLUSION

We trust that this letter provides the information you require. Please contact us 919-465-3801 if you have any questions. Thank you for the opportunity to be of assistance to you.

Sincerely,



Sean Casady, EI
Project Engineer
Criterium-Giles Engineers Inc.



Brent T. Blackburn, PE
Project Engineer
Criterium-Giles Engineers Inc.
NC Lic. No. C-2871