

Howerton Services, PLLC License # P-1716 3513 Cathedral Bell Road Raleigh, NC 27614 (919) 270-3460

October 25, 2021

Subject: Kara Residence

510 Mineral Springs Lane Fuquay Varina, NC 27526 Plan Revision Letter

Based on the request of the Contractor, the footings for the Screened Porch and the Covered Porch will be modified from the original plan. My assessment is as follows:

The original plans have the posts for both porches resting on 16"x 16"x 16" footings. There is an existing 7" thick concrete slab in place the proposed Screened Porch and Covered Porch will be constructed over. The contractor would like to dig out under the existing slab and place the footings under the existing slab. The new footings may be modified to 16"x 16"x 6" concrete footings under the existing 7" slab. This footing modification is acceptable.

The modified footings for the Screened Porch and Covered Porch meet all the requirements of the 2018 North Carolina Building Code for Residences.

10 25 2021



Init

Setbacks - Front:

PROPOSED USE:

OTAL HTD SQ FT

Back:__

Duplex: (Size ____x___) No. Buildings:_

Structures (existing or proposed): Single family dwellings:

Side:

| 11 | COUNTY NORTH CAROLINA |
|--|---|
| tial Application Date 6 23 21 | Application # |
| | CU# |
| | RESIDENTIAL LAND USE APPLICATION |
| Central Permitting 108 E. Front Street, Lillington, NC 27546 | Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harmett.org/permits |
| "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO P | PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION** |
| INDOWNER: ERIC + GARNETT KARA | Mailing Address: 510 MINERAL SPRINGS LANE |
| ty: FUQUAY VARINA State: NC Zip: 27526 | Contact No: 9196697292 Email: deptofinteriors @ yahoo |
| PPLICANT: JAMES BROUGHAM Mailing AG | ddress: 4226 GUNN POOLE RD |
| ty: MEBANE State: NC Zip:27302 | Contact No: 919 267-0420 Email: brougham pames@gm |
| | |
| DDRESS: 510 MINERAL SPRINGS CANE | // PIN: |
| - L | and Rook / Page: |

_) # Bedrooms:___ # Baths:___ Basement(w/wo bath):____ Garage:____ Deck:____ Crawl Space:___ Slab:

_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

__(Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms)

Home Occupation: # Rooms: Use:____ ____ Hours of Operation:__ x38) Use: ROOF OVEIL EXISTING SLAB 1/2 ENCLOSED sets in addition? (__) yes (X) no SLAB HAS CONTINUOUS 12X12 FOOTER - ADDING FOOTERS PER LETTER. New Well (# of dwellings using well _) *Must have operable water before final Water Supply: County _ Existing Well (Need to Complete New Well Application at the same time as New Tank) Existing Septic Tank __ Expansion Relocation **New 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

Manufactured Home: ___SW ___DW __TW (Size____x ___) # Bedrooms: ____ Garage: ___(site built?___) Deck:___(site built?___)

_____ No. Bedrooms Per Unit:___

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 and accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent

Does the property contain any easements whether underground or overhead (___) yes

Date

Other (specify):

Monolithic

Slab:

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.

(X) no

Manufactured Homes:

*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

strong roots · new growth

VAOA



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 = vithout expiration)

| OR AUTHORIZATION TO | CONSTRUCT SHALL BI | ECOME INVALID. The perm | it is valid for either 60 mor | nths or without expiration dependin | g upon |
|---|---|---|--------------------------------|---|----------|
| documentation submitted. | (Complete site plan = 60 mo | onths; Complete plat = without | expiration) | | |
| ☐ <u>Environmental H</u> | ealth New Septic Syst | tem N/A | | | |
| All property i | rons must be made v | <u>isible</u> . Place "pink prope | ty flags" on each com | er iron of lot. All property lin | es must |
| Die clearly riage | jed approximately evel | ry 50 feet between come | S. | flog driveways garages de | cks out |
| buildings, swir | nming pools, etc. Place | e flags per site plan deve | loped at/for Central Pe | flag driveways, garages, de ermitting. | one, car |
| Place orange | Environmental Health o | ard in location that is eas | ily viewed from road to | o assist in locating property. | |
| If property is th | nickly wooded, Environn | nental Health requires tha | t you clean out the <u>unc</u> | <u>lergrowth</u> to allow the soil ev | aluation |
| to be performe | ed. Inspectors should be | be able to walk freely arou | ınd site. <i>Do not grade</i> | e property. | |
| All lots to be | addressed within 10 | business davs after c | onfirmation. \$25.00 r | <u>eturn trip fee may be incu</u> | rred for |
| <u>failure to uno</u> | over outlet lid, mark l | house corners and prop | erty lines, etc. once | <u>lot confirmed ready.</u> | |
| | | | | | |
| Environment | al Health Existing Tar | nk Inspections | | | |
| Follow above | instructions for placing | flags and card on proper | ty. | | |
| Prepare for in | spection by removing | soil over outlet end of ta | nk as diagram indicate | es, and lift lid straight up (if p | ossible) |
| and then put | l <mark>id back in place</mark> . (Unl | ess inspection is for a se | otic tank in a mobile ho | me park) | |
| DO NOT LEAV | E LIDS OFF OF SEPTIC | TANK | | | |
| SEPTIC N | - | DRMATION MAY BE REQUIR | | | |
| If applying for authoriza | tion to construct please ind | icate desired system type(s): | can be ranked in order of | preference, must choose one. | |
| {}} Accepted | {}} Innovative | {}} Conventional | {}} Any | | |
| {}} Alternative | {}} Other | | | | |
| The applicant shall notification. If the answer | y the local health departnis "yes", applicant MUS | nent upon submittal of this a Γ ATTACH SUPPORTING | application if any of the g | following apply to the property V: | in |
| {_}}YES | Does the site contain a | any Jurisdictional Wetlands | | | |

Are there any Easements or Right of Ways on this property?

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

Does the site contain any existing water, cable, phone or underground electric lines?

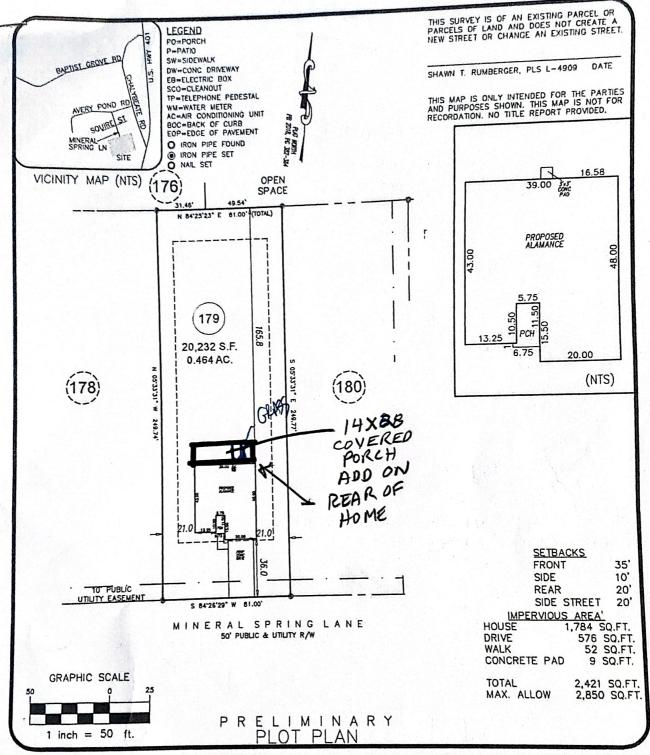
Accessible So That A Complete Site Evaluation Can Be Performed.

_} NO

} NO

}YES

}YES



| F | PROJECT: 18- | 003 AVERY POND |
|---|-----------------|----------------|
| D | DRAWN BY: | AMW |
| Г | SCALE: | 1"=50' |
| D | DATE: | 02-25-19 |

LGI HOMES 510 MINERAL SPRING LANE LOT 179 AVERY POND SUBDIVISION; PHASE IIIA HECTOR'S CREEK TWP., HARNETT CO., NC P.B. 2018, PG. 382-384

FOR



GLOBAL, INC U.S. VETERAN-DWNE 19 N MCKINLEY ST COATS, NO 27521 910.897.3257 ECLBGLOBALING.GE 910.897.2329 (FAX) 0076-4175