



Town of Erwin
Zoning Application & Permit
Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Erika G. Morales Lopez	Property Owner	"
Home Address	104 W. C. St	Home Address	
City, State, Zip	Erwin, NC, 28339	City, State, Zip	
Telephone	910 658 7846	Telephone	
Email	moraleslopez977@gmail.com	Email	

PAID

OCT 26 2021

TOWN OF ERWIN

Address of Proposed Property	104 W C St.		
Parcel Identification Number(s) (PIN)	0597-62-4740	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	bathroom addition		
Description of any proposed improvements to the building or property	Putting a half bathroom inside existing building		
What was the Previous Use of the subject property?	Residential		
Does the Property Access DOT road?	NO		
Number of dwelling/structures on the property already	2	Property/Parcel size	25
Floodplain SFHA Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Watershed Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Wetlands Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
MUST circle one that applies to property	Existing/Proposed Septic System Or Existing/Proposed County/City Sewer		

update side plan

MSB 10/1

PAID

OCT 25 2021

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Erika E. Morales Lopez	<i>Erika</i>	10/21/21
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	RM
Front Yard Setback	15'
Side Yard Setback	8'
Rear Yard Setback	15'

Existing Nonconforming Uses or Features	
Other Permits Required	<input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input type="checkbox"/> Other
Requires Town Zoning Inspection(s)	<input type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.
Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Fee Paid: 250	Date Paid: 10/25/21 Staff Initials: MSB

Comments: Putting a bathroom inside an existing home

Signature of Town Representative: *Ira Beck* Date Approved/Denied: 10/25/2021

~~No expansion of Building/Home - add to~~
Contact Harnett County Department
for plumbing permit 910-893-7525
- addition to existing home 910-893-7525

****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.



Initial Application Date: _____

Application # _____

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: ERIN G. MORALES LOPEZ Mailing Address: 104 West C. St

City: Erwin State: NC Zip: 28339 Contact No: 9106587846 Email: _____

APPLICANT: " _____" Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

ADDRESS: 104 West C. St Erwin NC 28339 PIN: _____

Zoning: R Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____
TOTAL HTD SQ FT _____ GARAGE SQ FT _____ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Modular: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
TOTAL HTD SQ FT _____ (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: _____ TOTAL HTD SQ FT _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size 6' x 7' Use: half bathroom Closets in addition? () yes () no
TOTAL HTD SQ FT 42 sq ft GARAGE _____

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: Existing 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.

Erin G. Morales Lopez
Signature of Owner or Owner's Agent

11/11/21
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



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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Erika G. Morales Lopez Date: 11/11/21
Site Address: 104 West C St Erwin NC 28339 Phone: 910-658-7846
Subdivision: _____ Lot: _____
Description of Proposed Work: Half bathroom Total Job Cost: \$1,530

General Contractor Information

Erika G. Morales Lopez (owner is doing the work) 910-658-7846
Building Contractor's Company Name Telephone
104 W. C. St Erwin NC 28339 moraleslopez977@gmail.com
Address Email Address

HEATED SQ FT _____ GARAGE SQ FT _____

License # _____

Electrical Contractor Information

Description of Work just add lightbulb to bathroom Service Size: _____ Amps T-Pole: Yes No
owner is doing this personally.
Electrical Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Plumbing Contractor Information

Description of Work just add water and sewer pipes # Baths 1 toilet
owner is doing work. Add toilet crosslink
Plumbing Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Insulation Contractor Information

owner is doing the insulation.
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.

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

11/11/21
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.

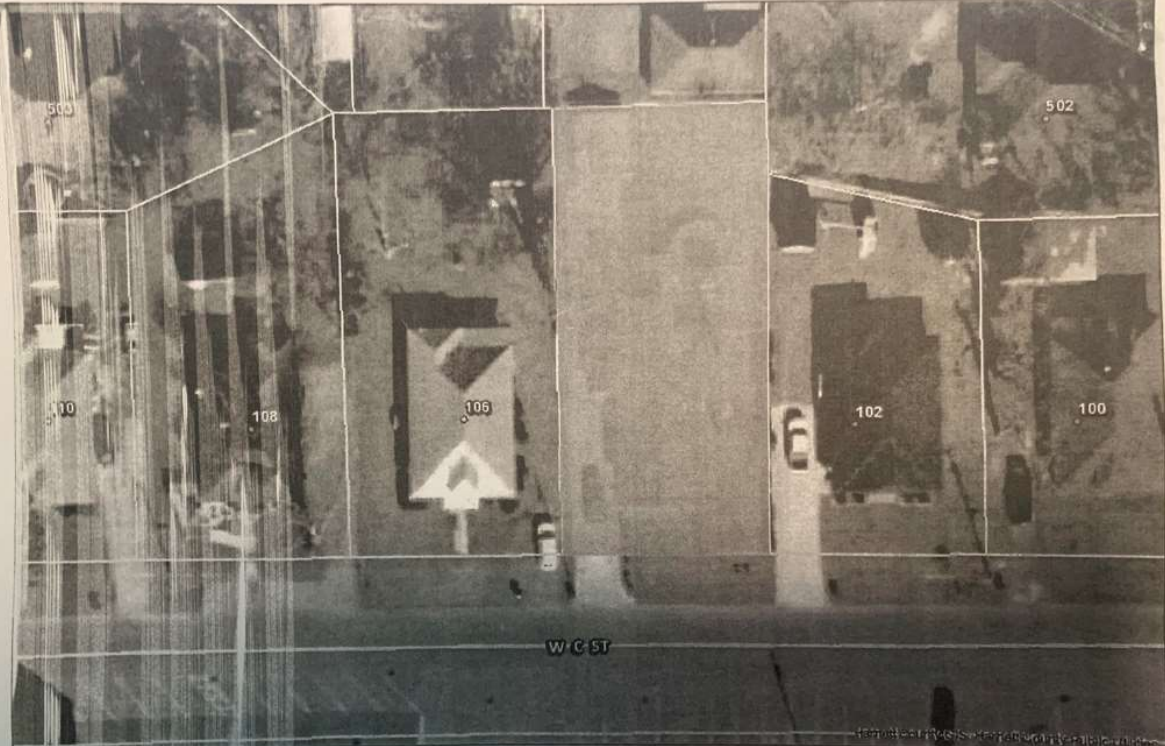
Has no more than two (2) employees and no subcontractors.

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: _____ Date: _____

Harnett GIS


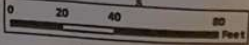
NOT FOR LEGAL USE




Harnett COUNTY
North Carolina

GIS/E-911 Addressing
 October 25, 2021

- | | | | |
|-------------------------------|-------------------------|--------------|---------|
| Recycle Center | Harnett County Boundary | NC | Parcels |
| Landfills | Address Numbers | US | |
| Surrounding County Boundaries | Airport | Roads | |
| Federal Property | Major Roads | Mile Markers | |
| City Limits | Interstate | Railroad | |

1 Inch = 47 feet

Half - Bath Add On to Home

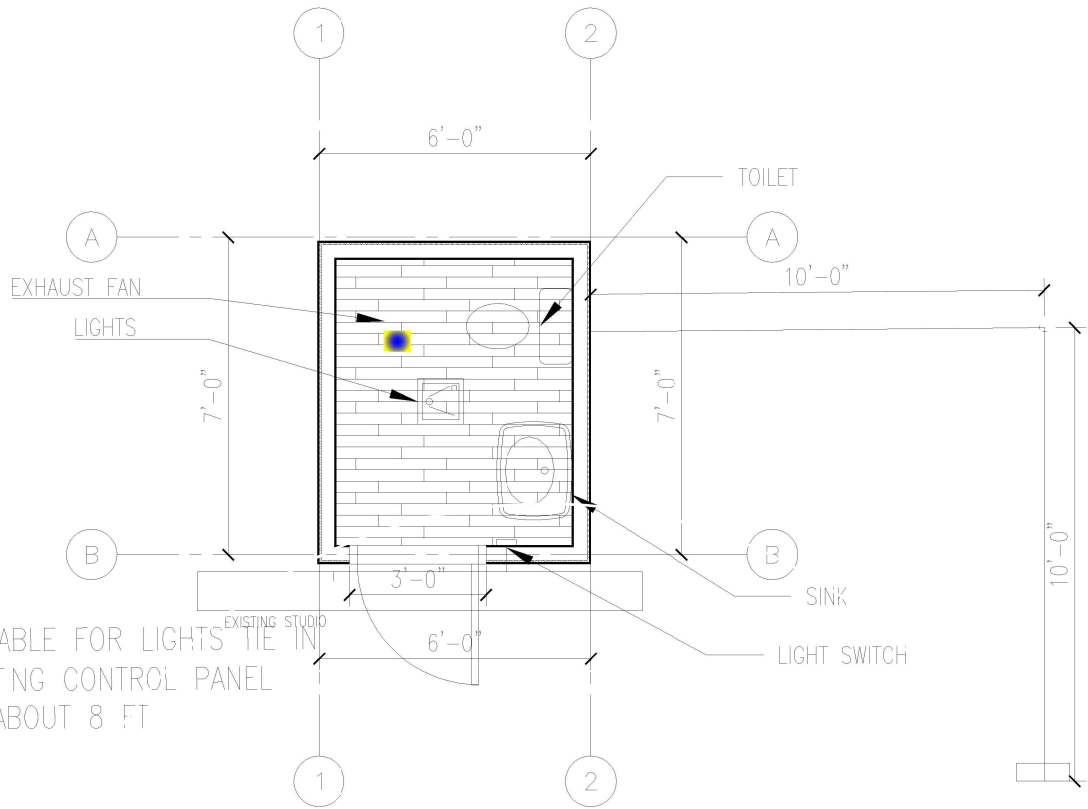
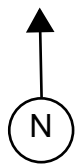
104 W C St Erwin

Drawings

Pages 1-9

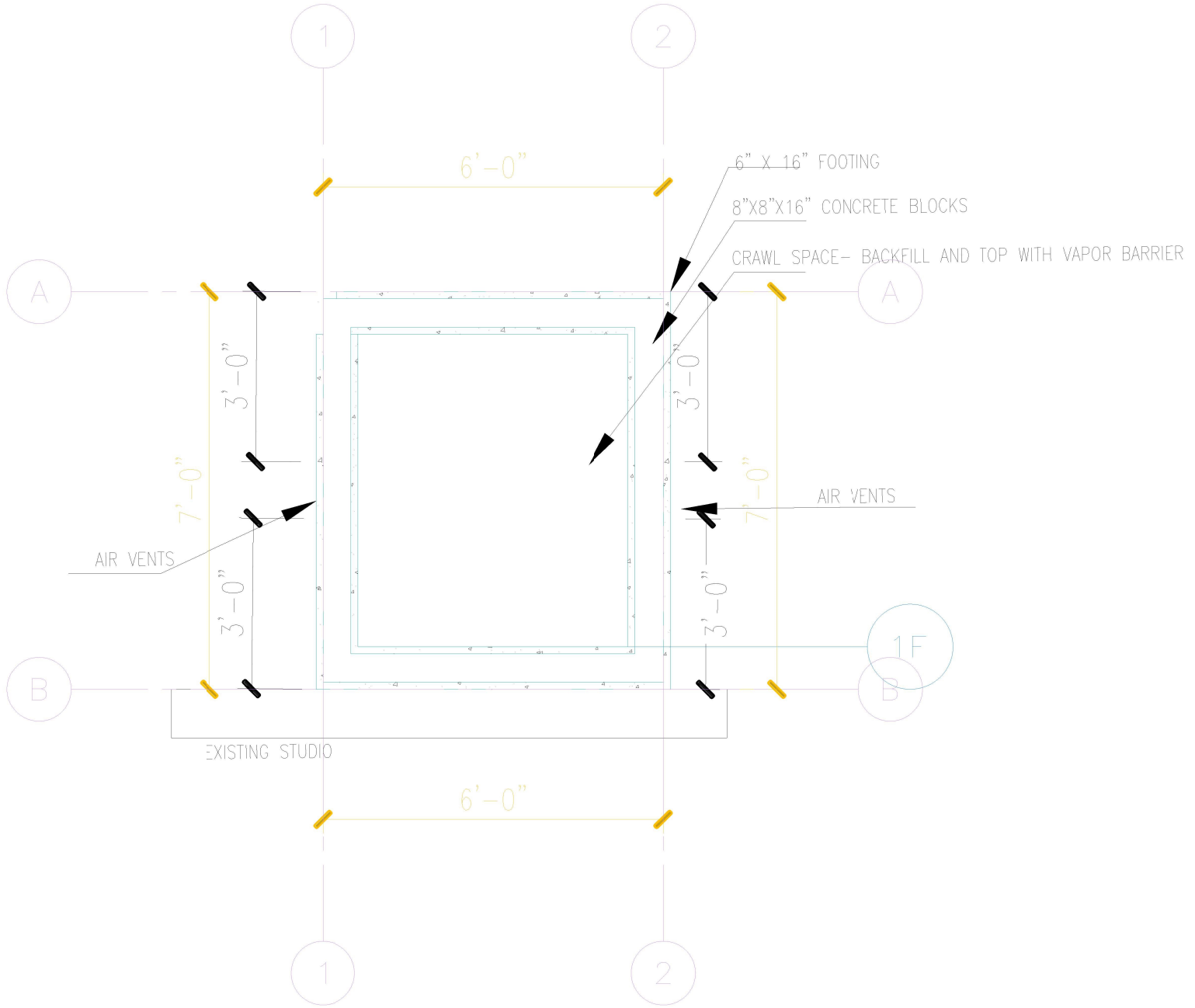
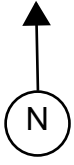
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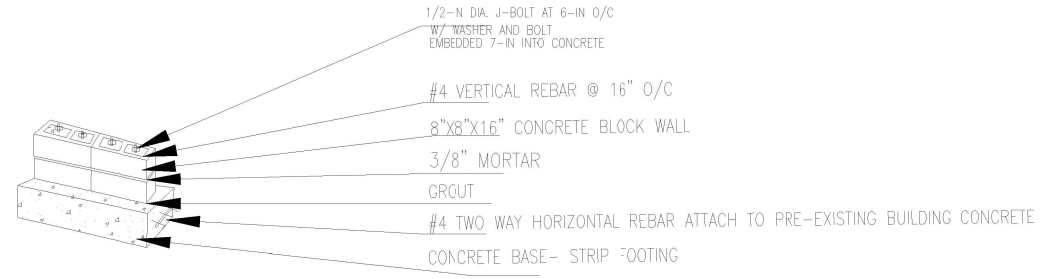
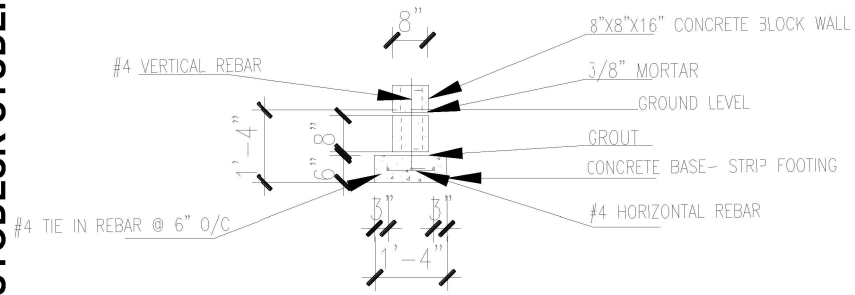
ELECTRICAL CABLE FOR LIGHTS TIE IN
TO PRE-EXISTING CONTROL PANEL
CONNECTION ABOUT 8 FT

OVERVIEW PLAN VIEW



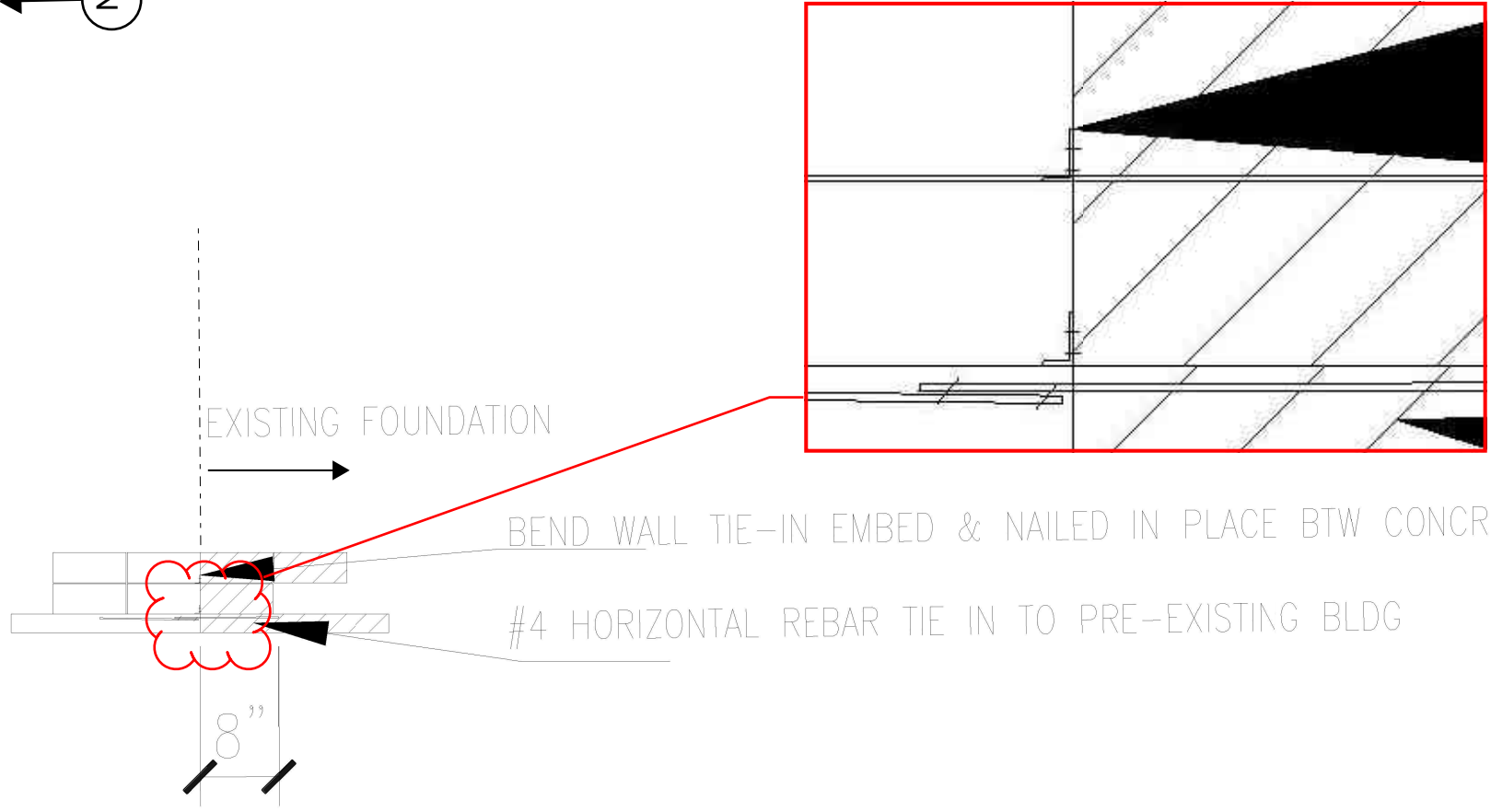
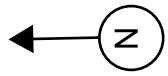
CONTINUOUS FOOTING FOUNDATION

104 W C St Erwin,
 NC 28339
 HALF BATH
 PROJECT DWGS



1F-CONTINUOUS FOOTING FOUNDATION DETAIL

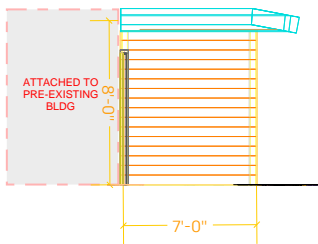
104 W C St Erwin,
 NC 28339
 HALF BATH
 PROJECT DWGS



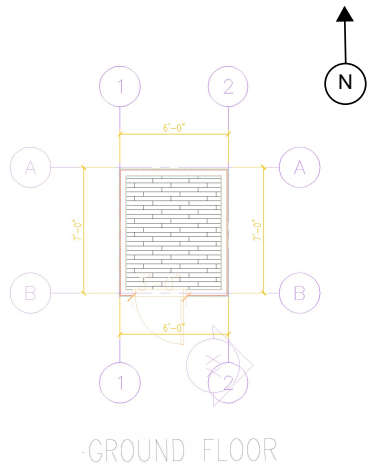
FOUNDATION TIE-IN TO HOUSE SECTION

PRODUCED BY AN AUTODESK STUDENT VERSION

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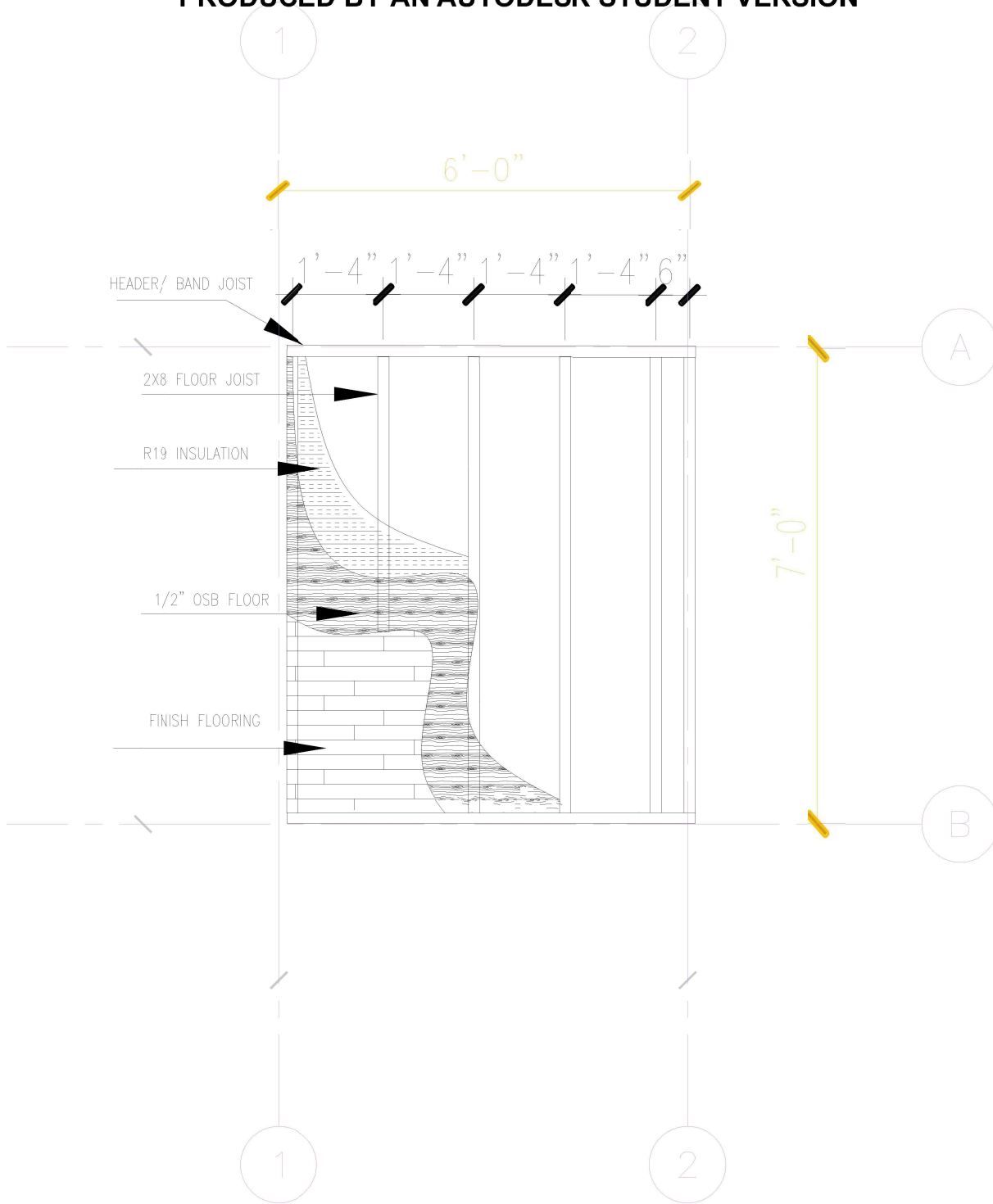
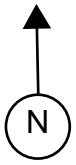


SIDE VIEW



GROUND FLOOR

104 W C St Erwin,
 NC 28339
 HALF BATH
 PROJECT DWGS

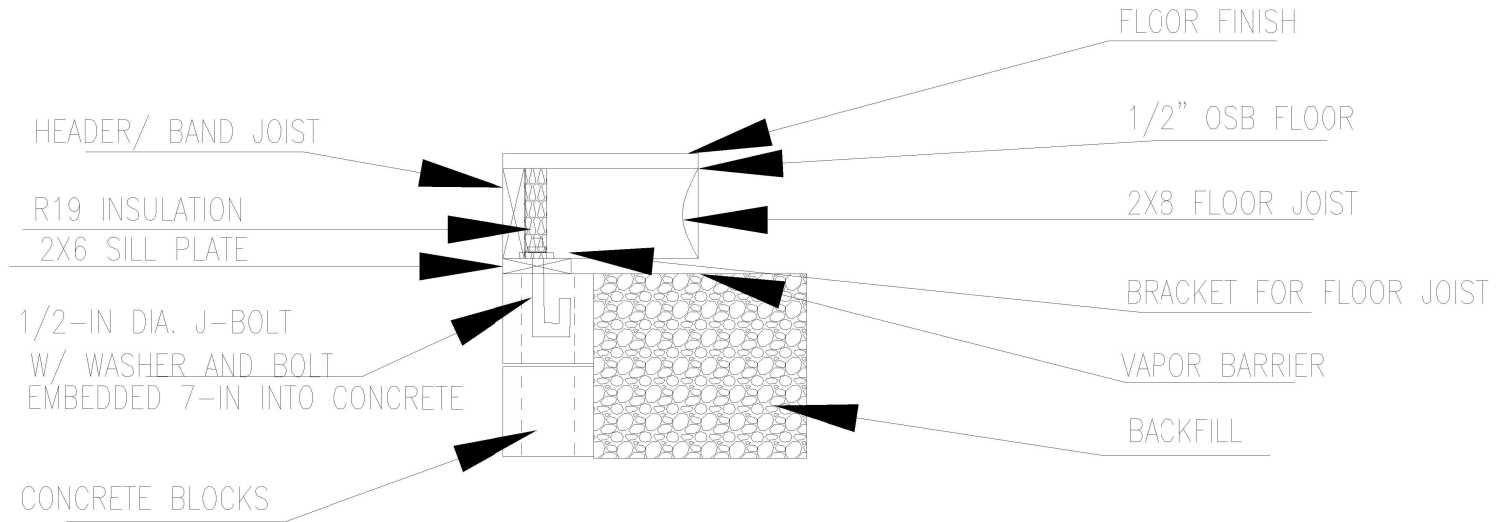


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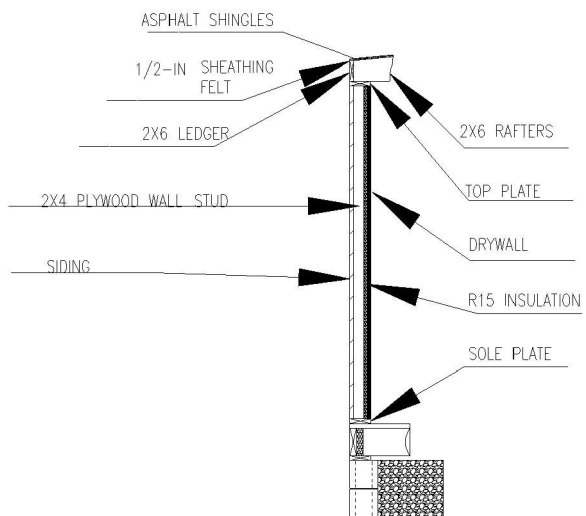
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BIRD EYE-GROUND FLOOR DETAIL

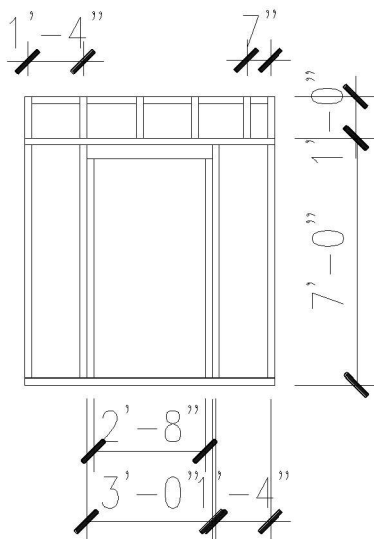
104 W C St Erwin, NC 28339 HALF BATH PROJECT DWGS
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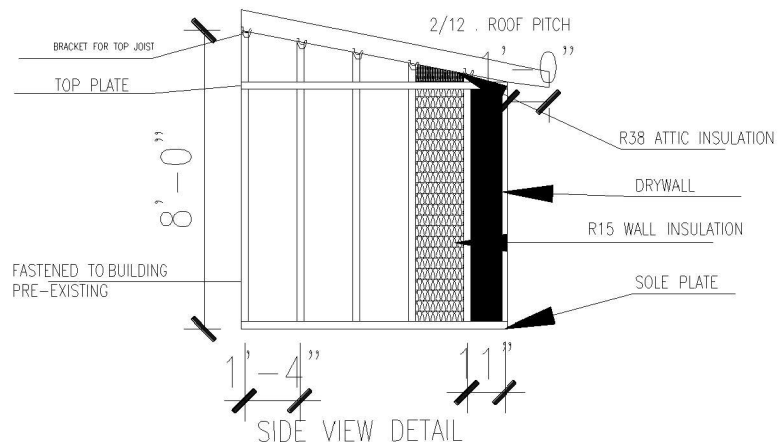
GROUND FLOOR DETAIL



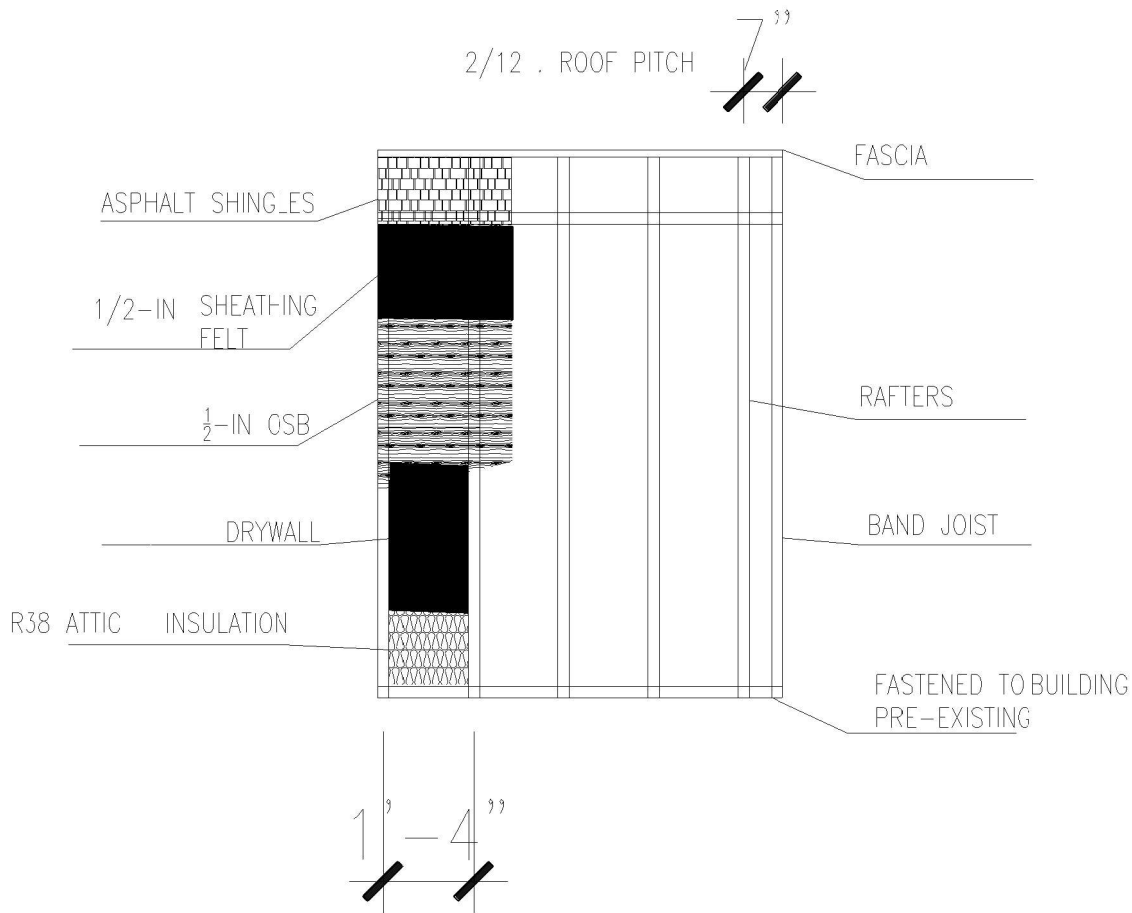
WALL DETAIL



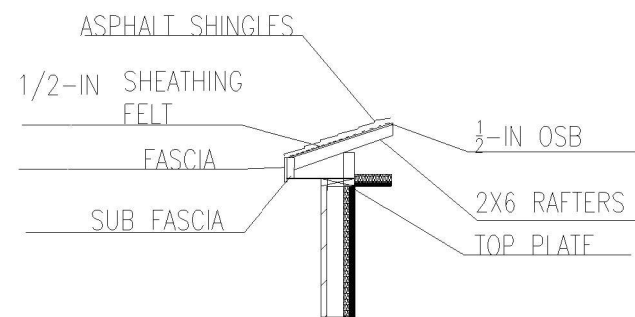
DOOR SIDE DETAIL



SIDE VIEW DETAIL



BIRD EYE- ROOF VIEW DETAIL



EAVES VIEW DETAIL