

Initial Application Date: September 21

Application #	

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Central Permitting

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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\*\*

ANDOWNER: Mailing Address:
City: State: Zip: Contact No: Email:
APPLICANT*: Crative Stope Mailing Address: 524 Wilkes rd Fayotterite MC  City: Fayetterille State: NC zip: 28306 Contact No: 585 456 3528 Email: Tessman Qureatiestaneni.co
Please fill out applicant information if different than landowner
ADDRESS: 100 Poly Company PIN:PIN:
oning:Flood:Watershed: Deed-Beok√ Page:
Setbacks – Front: Back: Side: Corner:
PROPOSED USE:  Monolithic
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab:
OTAL HTD SQ FI GARAGE SQ FI (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
Modular: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame  OTAL HTD SQ FT (Is the second floor finished? () yes () no Any other site built additions? () yes () no
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Size 12 x 16) Use: ENCLOSING EXISTING (OF POST Closets in addition? (_) yes (_) no COTAL HTD SQ FT GARAGE TO LIVE SPACE
Vater 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):
f 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. 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 of Owner's Agent 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.***

**APPLICATION CONTINUES ON BACK** 

strong roots • new growth

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



Application #

Each section below to be filled out by whomever performing work: Must be owner/occupier or licensed contractor. Address, company name & phone must match Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

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Owner's Name: Jondra Thomason	Date: 2/16/22
Site Address: 1837 Loop of Burnlevel NC 2832	3 Phone: 910-322-3852
Subdivision:	Lot:
Description of Proposed Work: Enclosing existing corport to	Total Job Cost: 20, 450
Livable Space General Contractor Information	
Creative Stone	588-456-3528
Building Contractor's Company Name	Telephone
524 Wilkes od Fayetterille NC 28306	Tessmana creativesporenc. com
Address	Email Address
8/0141 HEATED SQ FT 28/08 GARAGE SQ License #	192
Electrical Contractor Information	n Charles Charles
	1979 Amps T-Pole: Yes No
SECS Electric Electrical Contractor's Company Name	910 - 309 - 6502 Telephone
101030 MUSCOUT ON HODE MILLS NC 28348	BIGTEN. SMASMAU. Com
Address	Email Address
1800Z-L	
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work (x fend duct work into new	addition.
Cool Air	
Mechanical Contractor's Company Name	Telephone
306 N main st hope Mills NC 28348	Applied States organize a confidence
Address	Email Address
30929 License #	
Plumbing Contractor Information	<u>n</u>
Description of Work No plumbing to be done	# Baths
FARL LOCKLEAR PLUMBING	
Plumbing Contractor's Company Name	Telephone
3735 Carthage rol lumber ton NZ 28360	
Address	Email Address
17505	
License # Insulation Contractor Information	ya
Creative stone Con Drue ton	111
Insulation Contractor's Company Name & Address	Telephone
Control of the contro	र जार्ग्या द्वार हुन हर्षेत्र विकास

\*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 of Owner/Contractor/Officer(s) of Corporation

2/16/22 Date

The state of the s			
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:			
General ContractorOwnerOfficer/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 WIFITE: 2/16/22			