

Application # _____

Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

	-/44 /
Owner's Name: Larry Kennord	Date 8/22/24
Site Address: 121 Winding Creek Dr. Zillington A	VC Phone
Subdivision:	Lot
Subdivision:	7 Total Joh Cost 29,000
General Contractor In	oformation
Precision East Construction Building Contractor's Company Name	919 896 2095
Dullulliu Collilacioi S Collipari Harric	Telephone
12606 Cleveland Rd. Garner NC 27529	MCCISioneastconstruction @g Email Address
Address	
	ARAGE SQ FT_O
License #	Information
Description of Work [CIAS/Alling (an, can lights Ser	rvice Size: 200 Amps T-Pole: Yes No
Dem Electrical	
Electrical Contractor's Company Name	Telephone Lib com
107 Stack-lon Dr. Angier NC 27501	Samo. 1982@/ile.com
Address	Email Address
L34710	
License # Mechanical/HVAC Contract Mechani	otor Information
	ctor information
Description of Work N/A	
Mechanical Contractor's Company Name	Telephone
Medianical Contractor's Company Name	Telephone
Address	Email Address
	-
License #	
Plumbing Contractor	Information
Description of Work / / / /	# Baths
Plumbing Contractor's Company Name	Telephone
	<u> </u>
Address	Email Address
License #	Information
ΛΙ/Δ <u>Insulation Contractor</u>	r information.
าง เกา nsulation Contractor's Company Name & Address	Telephone
Institution Contractor's Company Name & Address	relebrione

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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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

8/23/14

Date

Affidavit for W The undersigned applicant being the:	Vorker's Com	pensation N.C.G.S	6. 87-14
The undersigned applicant being the.			
General ContractorC	Owner	_ Officer/Agent of the C	ontractor or Owner
Do hereby confirm under penalties of perset forth in the permit:	erjury that the pe	erson(s), firm(s) or corpo	ration(s) performing the work
Has three (3) or more employees	s and has obtain	ed workers' compensati	ion insurance to cover them.
Has one (1) or more subcontract	ors(s) and has o	btained workers' compe	ensation insurance to cover
Has one (1) or more subcontract covering themselves.	ors(s) who has t	their own policy of worke	ers' compensation insurance
Has no more than two (2) emplo	yees and no sub	ocontractors.	
While working on the project for which to Department issuing the permit may require to issuance of the permit and at any time carrying out the work. Sign w/Title:	uire certificates one during the per	of coverage of worker's mitted work from any pe	compensation insurance prior



Initial Application Date

Application #

iniual Application Date.						
			SIDENTIAL LAND USE		CU# 893-2793 www.h	namett org/nemite
Central Permitting			Phone: (910) 893-7525			
			CHASE) & SITE PLAN ARE RE			PPLICATION
LANDOWNER: LAIN	Kennaru	11	_ Mailing Address: 21	WINDINGC	REN DI.	
city: Lillington	State	<u>K_zip27546</u> c	Contact No: 928-713	Email:	grn trg390	gmail. com
APPLICANT : HACCE		Mailing Addr	ss 12606 Clevel	land Rd.	0	
city: Garner	State	V zip. 27529 c	ontact No: 919896 2	095 Email:	recisioneastco	nstruction@
*Please fill out applicant Infor	mation if different than landov	wner				grail. con
ADDRESS: 11 Wil			PIN: 0661	<u>- 09 - 1831 -</u>	-000	
Zoning: RA-30 Floo	od: MIN. Waters	hed: 136 Deed	Book / Page: 4218:	2492		
Setbacks - Front: 25	Back: Side	e:_ <u>//)\</u> Corner:	<u> </u>			
PROPOSED USE:						
☐ SFD: (Size x) # Bedrooms: #	Baths: Basement(w/wo bath): Garage:_	Deck: Cra	wl Space: Slab	Monolithic Slab:
			nished? () yes () no			
			ent (w/wo bath) Garag			
IOIALHID SQFI	(IS t	ne second floor finishe	ed? () yes () no Ar	ly other site built ad	ditions? yes	
☐ Manufactured Home	:SWDWT\	N (Sizex	_) # Bedrooms: Gara	age:(site built?_) Deck:(site	built?)
Duplex: (Size	x) No. Buildings:	No. B	edrooms Per Unit:	то	TAL HTD SQ FT	
☐ Home Occupation: #	Rooms:	Use:	Hours of Operation	on:	#Emp	oloyees:
·/	1/1 10	and.	11 (. 1.			
	and the second second) Use: 	able roof, patio	c	losets in addition?	yes no
TOTAL HTD SQ FT	GARAGE	_1/A	•			
Water Street W San	umba Fulation Male	Now Mail 64	of dwellings using well	1 *15 unt hour	a anarabla water b	ofore final
		(Need to Con	plete New Well Application	n at the same time a	as New Tank)	erore milai
(Complete	e Environmental Health C	hecklist on other side	nExisting Septic Tan of application if Septic)			. /
Does owner of this tract of	f land, own land that cont	ains a manufactured h	ome within five hundred for	eet (500') of tract list	ed above? () yes	s ∠ no
Does the property contain	any easements whether	underground or overh	ead () yes () no			
Structures (existing or pro	oposed): Single family dwe	ellings:l	Manufactured Homes:		Other (specify):	
If permits are granted I ag	ree to conform to all ording statements are accura	nances and laws of the	e State of North Carolina rest of my knowledge. Per	egulating such work	and the specification	ons of plans submitted
Thereby state that foregon	71.4	5_	Soc of the Milothouge. Fel	\$/29/1	4	addition provided.
	Signature of Owr	ner or Owner's Agent		Date	<u>-</u>	
***It is the owner/applic to: boundary inform	ants responsibility to pr nation, house location, u	ovide the county wit	h any applicable information head easements, etc. The that is contained within	e county or its emp	loyees are not res	uding but not limited ponsible for any
			om the initial date if pem			

APPLICATION CONTINUES ON BACK

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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 <u>undergrowth</u> 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"

If applying	for authorization	on to construct please in	dicate desired system type(s):	can be ranked in order of preference, must choose one.			
{_}} Acc	epted	{} Innovative	{}} Conventional	{}} Any			
{_}} Alte	rnative	{} Other	NA	<u> </u>			
			tment upon submittal of this a ST ATTACH SUPPORTING	pplication if any of the following apply to the property in G DOCUMENTATION:			
_}YES	(X) NO	Does the site contain	any Jurisdictional Wetlands?				
}YES	NO	Do you plan to have an <u>irrigation system</u> now or in the future?					
{_}}YES	NO	Does or will the building contain any <u>drains</u> ? 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	SNO	Are there any Easements or Right of Ways on this property?					
YES	∐} NO	Does the site contain	n any existing water, cable, pl	none or underground electric lines?			
		If yes please call N	o Cuts at 800-632-4949 to loc	cate 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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