



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**

Owner's Name: Timothy J. McKenzie and Callie S. McKenzie Date 1/23/2025  
Site Address: 234 Oakridge Duncan Rd., Fuquay Varina, NC Phone (704) 957-8005  
Subdivision: N/A Lot N/A  
Description of Proposed Work: finish attic area for bonus room Total Job Cost \$ 89,500.00

**General Contractor Information**

Barefoot Building Company, LLC (910) 890-3256  
Building Contractor's Company Name Telephone  
P.O. Box 1411, Coats, NC 27521 wrbarefoot@yahoo.com  
Address Email Address  
81027 HEATED SQ FT 946 sq GARAGE SQ FT 0  
License #

**Electrical Contractor Information**

Description of Work install electrical system for bonus room Service Size: \_\_\_\_\_ Amps T-Pole: Yes ☒ No  
Mabry's Electrical Service (919) 639-4837  
Electrical Contractor's Company Name Telephone  
731 Mabry Road, Angier, NC daniel@mabryelectrical.com  
Address Email Address  
15077 U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work install HVAC system for finished bonus room  
K.O. Heating and Air Conditioning (Daniel Budreau) 516-557-7795  
Mechanical Contractor's Company Name Telephone  
6004 Fauvette Lane, Holly Springs, NC 27540 K.O. heatingandair@gmail.com  
Address Email Address  
33565  
License #

**Plumbing Contractor Information**

Description of Work N/A # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
License # \_\_\_\_\_

**Insulation Contractor Information**

Stephens Building Products (919) 630-8365  
Insulation Contractor's Company Name & Address Telephone  
1200 Corporation Pkwy. - Suite 121, Raleigh, NC 27610

**\*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

1/23/2025  
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: 1/23/2025





Initial Application Date: \_\_\_\_\_

Application # \_\_\_\_\_

CU# \_\_\_\_\_

## COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) &amp; SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\*

LANDOWNER: Timothy J. McKenzie & Callie S. McKenzie Mailing Address: 234 Oakridge Duncan Rd., Fuquay-Varina, NC  
City: Fuquay-Varina State: NC Zip: 27526 Contact No: (704) 957-8005 Email: tim@mckenzieperworks.com

APPLICANT\*: Barefoot Building Company, LLC Mailing Address: P.O. Box 1411  
City: Coats State: NC Zip: 27521 Contact No: 910-890-3254 Email: wrbarefoot@yahoo.com

\*Please fill out applicant information if different than landowner

ADDRESS: 234 Oakridge Duncan Rd., Fuquay-Varina, NC PIN: 0645-11-5544.000

Zoning: \_\_\_\_\_ 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 \_\_\_\_\_ x \_\_\_\_\_) Use: finish unfinished attic for bonus room Closets in addition? ( ) yes (X) no  
**TOTAL HTD SQ FT** 946 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 (X) no

Does the property contain any easements whether underground or overhead ( ) yes (X) no

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

[Signature]  
Signature of Owner or Owner's Agent

1-23-2025  
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

**\*\*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 N/A

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.**

DO NOT REMOVE!

**Details: Appointment of Lien Agent**  
Entry #: 2302251

Filed on: 01/23/2025  
Initially filed by: WRBarefoot

**Designated Lien Agent**

Investors Title Insurance Company

Online: [www.lientnc.com](http://www.lientnc.com) (<http://www.brenco.com>)

Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: [support@lientnc.com](mailto:support@lientnc.com) ([mailto:support@lientnc.com](mailto:mailto:support@lientnc.com))

**Project Property**

234 Oakridge Duncan Rd.  
Fuquay-Varina, NC 27526  
Harnett County

**Property Type**

1-2 Family Dwelling

**Print & Post**



**Contractors:**

Please post this notice on the Job Site.

**Suppliers and Subcontractors:**

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

**Owner Information**

Timothy J. McKenzie  
234 Oakridge Duncan Rd.  
Fuquay-Varina, NC 27526  
United States  
Email: [wrbarefoot@yahoo.com](mailto:wrbarefoot@yahoo.com)  
Phone: 910-890-3256

**Date of First Furnishing**

01/23/2025

View Comments (0)

Technical Support Hotline: (888) 690-7384





## Harnett County GIS

**PID:** 050645 0027 05

**PIN:** 0645-11-5544.000

**Account Number:** 1500037020

**Owner:** MCKENZIE TIMOTHY J & MCKENZIE CALLIE S

**Mailing Address:** 234 OAKRIDGE DUNCAN RD FUQUAY VARINA, NC 27526

**Physical Address:** 234 OAKRIDGE DUNCAN RD FUQUAY-VARINA, NC 27526  
ac

**Description:** LOT#4 RAYFORD BAKER 1.870ACS MAP#2013-253

**Surveyed/Deeded Acreage:** 1.87

**Calculated Acreage:** 1.88

**Deed Date:**

**Deed Book/Page:** 3832 - 0889

**Plat(Survey) Book/Page:** 2010 - 850

**Last Sale:** 2020 - 6

**Sale Price:** \$480000

**Qualified Code:** Q

**Vacant or Improved:** I

**Transfer of Split:** T

**Actual Year Built:** 2017

**Heated Area :** 2485 SqFt

**Building Count :** 1

**Building Value:** \$347249

**Parcel Outbuilding Value:** \$29990

**Parcel Land Value:** 130440

**Market Value:** \$507679

**Deferred Value:** \$0

**Total Assessed Value:** \$507679

**Zoning:** RA-30 - 1.88 acres (100.0%)

**Zoning Jurisdiction:** Harnett County

**Wetlands:** No

**FEMA Flood:** Minimal Flood Risk

**Within 1mi of Agriculture District:** Yes

**Elementary School:** Northwest Harnett  
Elementary

**Middle School:** Harnett Central Middle

**High School:** Harnett Central High

**Fire Department:** Northwest Harnett

**EMS Department:** Medic 14

**Law Enforcement:** Harnett County Sheriff

**Voter Precinct:** Northwest Harnett

**County Commissioner :** Duncan Edward Jaggars

**School Board Member:** John Hairr



Generating Map...