Initial Application Date: 5/19/25  Application #
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  Central Permitting 420 McKinney Pkwy Lillington NC 27546 Phone (M2) 200 Table 1
120 Moraliney Fkwy, Ellington, 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) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: Ever Morales Bautista Mailing Address: 987 Carson gregory Rd
City: Angier State: NC Zip: 27501 Contact No. (919) 520-9260 Email: morales . 84@ Live. Com
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email:
ADDRESS: 987 Carson Gregory Rd PIN: 0691-64-0546, p.00
Zoning: ZA - 3 0 Flood: Watershed: Deed Book / Page:
Setbacks – Front: Back: Side: Corner:
PROPOSED USE:
☐ SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: TOTAL HTD SQ FT (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 TOTAL 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: TOTAL HTD SQ FT
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Size 6+31+29 Use: 109 raund Pool Closets in addition? (_) yes (X) no
GARAGE
Water Supply:CountyExisting WellNew 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 TankExpansionRelocationExisting Septic TankCounty Sewer  (Complete Environmental Health Checklist on other side of application if Septic)  Oces 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
structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
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 talse information is provided.
Ever Morales Bautista 5/19/25 Signature of Owner's Agent  Date
to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any
*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK



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)

<u>Environmental</u>	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

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 <u>irrigation system</u> 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.



\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Application # \_\_\_\_\_ 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: Ever Morales Bautista	Data 5/10/25
Owner's Name: Ever Morales Bautista Site Address: 987 Carson Gregory Rd Angier No 2	7501 Phone (919) 620-421.0
Subdivision:	I of
Subdivision:	Total Job Cost 65.000
Ganaral Contractor Informati	
Royal Jandscaping & Pool  Building Contractor's Company Name	
Building Contractor's Company Name	(914) 614 - 8134 Telephone
Address	Boyalland Scape Pw@gmail.com Email Address
License # HEATED SQ FT GARAGE S	Q FT
Flectrical Contractor Informati	on
Description of Work Service Size:	Amps T-Pole: Yes No
Description of Work Service Size:  Ever Morales Bautista  Electrical Contractor's Company Name	(919) 520-9260
267 Company Name	Telephone
987 Carson Gregory Rd Angier NC 27501 Address	morales_84@ Live. com Email Address
License #	
Mechanical/HVAC Contractor Inform	mation
Description of Work	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
	Email Address
License #	
Plumbing Contractor Information	<u>on</u>
Description of Work	# Baths
Ever Morales Bautista Plumbing Contractor's Company Name	(919) 520-9260 Telephone
987 Carson Gregory Rd Angier NC 27501	morales. 84 @ Live. com
Address	Email Address
License #	
Insulation Contractor Information	<u>on</u>
Insulation Contractor's Company Normal 8 A LL	
Insulation Contractor's Company Name & Address	Telephone

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



5/19/25

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.

Ever Morgles Bautista

Signature of Owner/Contractor/Officer(s) of Corporation  Date
Signature of Owner/Contractor/Officer(s) of Corporation 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: Fver Morales Brutiala Dulmer

## **APPENDIX H**

# AFFIDAVIT OF ON-SITE WASTEWATER EXISTING SYSTEM PUSUANT TO N.C.G.S. §160D-1110(h1) [This form is only required with a permit application if the permit applicant is applying for exemption as allowed by N.C.G.S. § 160D-1110(h1)]

STATE OF NORTH CAROLINA
COUNTY OF Harnett
Inspection Department
Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered:  987 Carson Gregory Rd Angrer NC 27501 - 0691-64-0546.000
I, Ever Morales Bautista
(Print Full Name)
owner of the property, do hereby under penalties of perjury affirm that the proposed building construction will meet local and State on-site wastewater system setback requirements pursuant to N.C.G.S. § 130A-335. Additionally, the proposed construction shall not increase the design daily flow or wastewater strength of the existing system and thereby absolves the State, Inspection Department, and Local Health Department of any responsibility or liability regarding the existing wastewater system.
The property owner may, at his or her discretion, consult with an authorized on-site wastewater evaluator certified by the North Carolina On-Site Wastewater Contractors and Inspectors Certification Board or an inspector, as defined in N.C.G.S. § 90A-71(5), to locate the on-site wastewater existing system and verify setbacks requirements prior to executing this affidavit.
Ever Horgles Bautista 5/19/25
(Signature of Affiant)  Date
Sworn to (or affirmed) and Subscribed before me this the $\frac{14}{12}$ day of $\frac{12}{12}$ , $\frac{12}{12}$
Signature of Notary Public
July Obando Moveno
My Commission Expires: 0/14/28 (Notary Stamp or Seal) My Commission Expires 0/14/28

### STATE OF NORTH CAROLINA

## **OWNER EXEMPTION AFFIDAVIT**

**COUNTY OF HARNETT** 

PURSUANT TO G.S. 87-14(a)(1)

TOWN OF ANGIER INSPECTIONS DEPARTMENT

Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered:			
•			
1. Ever Morales Boutista			
(Print Full Name)			
hereby claim an exemption from licensure under (G.S. 87-1(b)(2) by initialing the relevant provision in paragraph 1 and initialing paragraphs 2-4 below and attesting to the following:			
1. £.M.B I certify that I am the owner of the property set forth above on which this building is to be constructed or altered;			
OR			
l am legally authorized to act on behalf of the firm or corporation which is constructing or altering this building on the property owned by the firm or corporation as set forth above(name of firm or coporation:);			
2. 上光記 will personally superintend and manage all aspects of the construction or alternation of the building and that duty will not be delegated to any person not duly licensed under the terms of Article 1 of Chapter 87 of the General Statutes of North Carolina;			
3. F.M.BI will be personally present for all inspections required by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina;			
4. F.M.BI understand that a copy of the AFFIDAVIT will be transmitted to the North Carolina Licensing Board for General Contractors for verification that I am validly entitled to claim an exemption under G.S. 87-1(b)(2) for the building construction or alteration specified herein. I further understand that, if the North Carolina Licensing Board for General Contractors determines that I was not entitled to claim this exemption, the building permit issued for the building construction or alteration specified herein shall be revoked pursuant to G.S. 153A-362 or G.S. 160A-422.			
Ever Morales Bautista 5/19/25			
(Signature of Affiant) Date			
Sworn to (or affirmed) and subscribed before me this the 19 day of May 2025			
Notary Public: JUDY OBANDO MORENO NOTARY PUBLIC WAKE FOUNTY, N.C. My Commission Expires OF HD2			
NOTE: It is a Class E felony to willfully commit positions in any efficient to be			
(NOTE: It is a Class F felony to willfully commit perjury in any affidavit taken pursuant to law-G.S. 14-209)			

