

strong roots + new growth

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

RESIDENTIAL BUILDING APPLICATION

Site Address: 658 Gachman way Sonford	<u> </u>
Owner: Scott Movvell Phone:	
Description of Proposed Work: byld a detach garage	Total Job Cost: 121,642
GENERAL CONTRACTOR IN	
* Must be owner or licensed contractor. Address, company name	0 0
Si R Geneval Contracting Co General Contractor's Company Name	(919)806-4529
General Contractor's Company Name	Phone
2530 Mevidian PKWY Ste 300 Address	976 @ SRGENERALCONTRACT. COM
Address	Email
84312 License #	
ELECTRICAL CONTRACTOR	INFORMATION
Description of Work: New whing for gavage	Service Size: Amps I-Pole: YES LI NO LI
Electrical Contractor's Company Name	(919) 770-7766 Phone
Electrical Contractor's Company Name	Phone
179 Lamn Lone Sonford NC27332	TT GREEU 179@ Yohoo.com
	Elliali
23639 License #	
MECHANICAL/HVAC CONTRACT	OR INFORMATION
MEGNANICAL/IIVAG GONTKAGI	OK IIII OKIII/KIION
Description of Work:	
Bosonphon of Work.	
Mechanical Contractor's Company Name	Phone
Westianical Contractor's Company Name	,
Address	Email
License #	
PLUMBING CONTRACTOR I	NFORMATION
	2
Description of Work: New plumbing for 1/2 both vo	# of Fixtures: 2
Colon Wesley Woodall	(919)464-5582
Plumbing Contractor's Company Name	Phone
S767 Cornwollis Rd Garner, UC27524	Colin Q upperechelon service.com
Address '	Lillali
License #	
INSULATION CONTRACTOR	INFORMATION
N/A unfinished space	
Insulation Contractor's Company Name '	Phone



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.

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Loud Merdin	08/28	25
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:



DESIDENTIAL LANDLISE APPLICATION

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RESIDENTIAL LAND USE APPLICATION	
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SITE ADDRESS: 658 Gach man Way Sombod PIN:
LANDOWNER: Scott Morrell Mailing Address:
City: 50n (cv) State: 12 Zip: 27332 Phone: Email:
*Please fill out applicant information if different than landowner.
APPLICANT: S'R Genard Contracting Mailing Address: 2530 Meridian Parking Ste 300 City: Durham State: MC Zip: 27713 Phone: (919)491-8534 Email: Infaco SR GENERALCONTRACT. (
City: Durhom State: MC Zip: 27713 Phone: (919)491-8534 Email: Infa@ SRGENFRALCONTRACT. (
PROPOSED USE:
Single Family Dwelling: (Sizex) # Bedrooms: # Baths: X Garage: Attached, Detached (Circle One) Accessory: Deck, Patio, Porch (Circle One)
TOTAL HTD SQ FT: GARAGE SQ FT: Foundation Type: Crawl Space: Stem Wall: Mono Slab: Basement:
☐ Modular: (Sizex) # Bedrooms: # Baths: Garage: Attached, Detached (Circle One) Accessory: Deck, Patio, Porch (Circle One)
TOTAL HTD SQ FT:
☐ Manufactured Home: SW ☐ DW ☐ TW ☐ (Sizex) # Bedrooms: Garage: Attached, Detached (Circle One) Accessory: Deck, Patio (Circle One)
ZONING:
□ Duplex: (Sizex) # Buildings: # Bedrooms Per Unit: TOTAL HTD SQ FT:
Addition/Accessory/Other: (Size 30 x 36) Use: Stick built gauge
UTILITIES:
Water Supply: County ✓ Existing Well □ New Well (# of dwellings using well) □
Sewage Supply: New Septic Tank □ Expansion □ Relocation □ Existing Septic Tank □ County Sewer □
(Complete Environmental Health Checklist on other side of application if Septic is selected)
GENERAL PROPERTY INFORMATION:
Does the landowner own another tract that contains a manufactured home within 500 feet? 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):
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 the foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.
Paul March 1
Signature of Owner or Owner's Agent Date

Permits are valid for 6 months from the issue date, or 12 months from last inspection once inspections have been initiated. It is the owner/applicant's 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.



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Environmental 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 permit shall become invalid. This permit will be valid for 60 months.

□ NFW	SEPTIC	SYSTEM	INSPECTION

- All property irons must be made visible. Place pink flags on each corner of lot & approximately every 50 feet between corners.
- Place orange flags at the corners of each proposed structure per site plan submitted to Central Permitting.
- Post orange Environmental Health sign in location that is visible from road to assist in locating property.
- If property is thickly wooded, you will be required to 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.

☐ EXISTING TANK INSPECTION

- Follow above instructions for placing flags and sign on property.
- Prepare for inspection by removing soil over outlet end of tank, lift lid straight up (if possible), and then put lid back in place.
 Does not apply to septic tank in a mobile home park
- . DO NOT LEAVE LIDS OFF OF SEPTIC TANK

SEPTIC CHECK LIST

If applyi	ng for Auth	norization to	Construct, please indicate de	sired system type(s):	Can be ranked in order	r of preference, must choose	one.
	Accep	ted	☐ 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 ju	ırisdictional wetlands	?		
			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	s, springs, waterlines	, or wastewater syst	tems on this property?	
	YES 🗆	NO 🛮	Is any wastewater going to	be generated on the	site other than dom	nestic sewage?	
	YES 🗆	NO 🗹	Is the site subject to approv	al by any other Pub	lic Agency?		
	YES 🗆	NO 🛭	Are there any easements o	r rights-of-way on th	is property?		
	YES 🗆	NO 🗆	Does the site contain any e	existing water, cable,	phone, or undergro	und electric lines?	
			If yes, please call No Cuts	at 800-632-4949 to I	ocate 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. I understand that a \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot is confirmed to be ready.

Signature of Owner or Owner's Agent

Date | 3 | 2

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 2443369

Filed on: 09/02/2025 Initially filed by: Srgc

Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com

Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603 **Phone:** 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com imatte supportédisorais

Project Property

658 COACHMAN WAY SANFORD, NC 27332 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

Owner Information

SCOTT MORRILL 658 COACHMAN WAY SANFORD, NC 27332 United States

Email: INFO@SRGENERALCONTRACT.COM

Phone: 919-907-8826

Date of First Furnishing

09/16/2025

View Comments (0)

Technical Support Hotline: (888) 690-7384