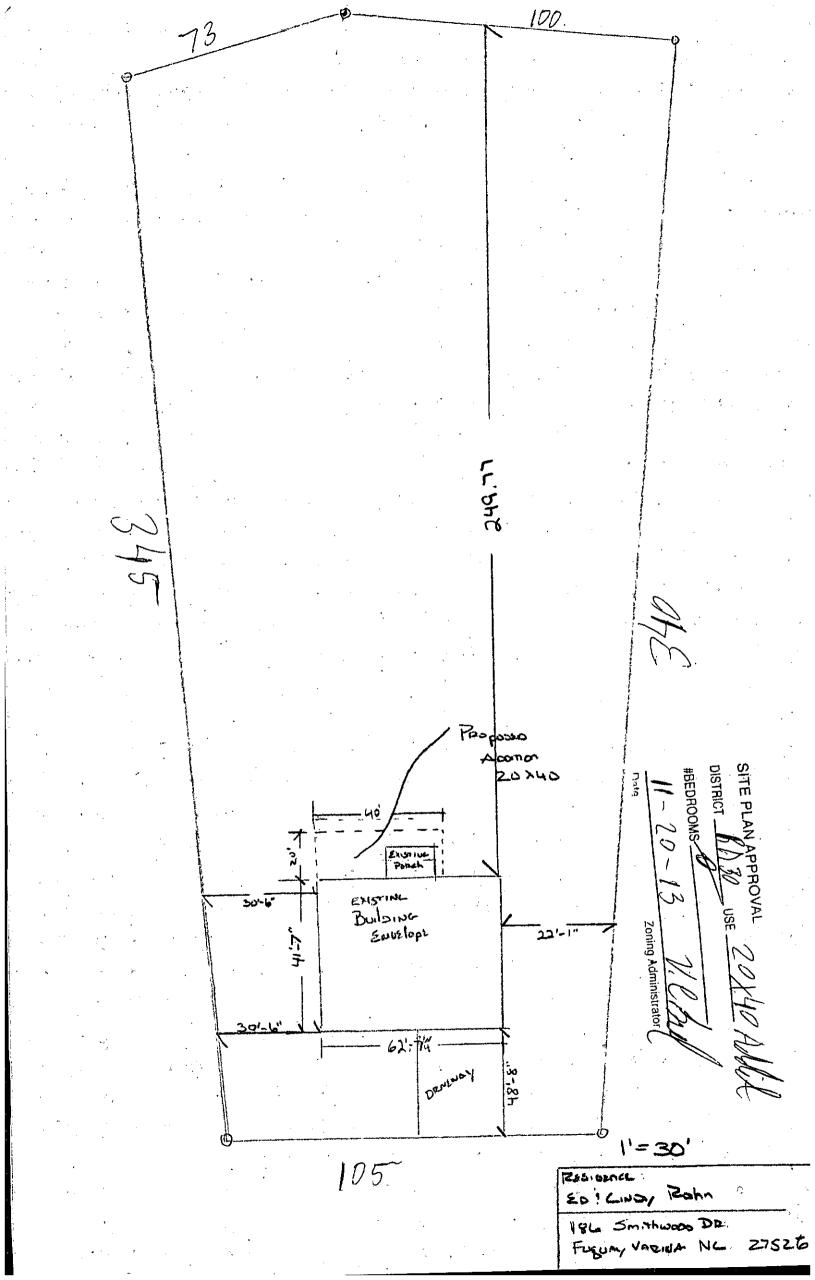
Initial Application Date: 11 - 20 -13	SCANNED	Application # 135 00 32512
COUNTY OF Central Permitting 108 E. Front Street, Lillington,	F HARNETT RESIDENTIAL LAND U NC 27546 Phone: (910) 893-752	
"A RECORDED SURVEY MAP, RECORDED DEED (OR	OFFER TO PURCHASE) & SITE PLAN ARE	REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: ED : CINDY Rohn	Mailing Address:	86 Smithwood Deive
City: FUGUAY VARINA State NC Z	27526 p: Contact No: 919-60	86 Smithwood Delue 5-0743 Email: gunny Rohne gmail.com
APPLICANT & EO ROM	Mailing Address: 186 Smill	nwas Dews
City: State: Zi	27526 Contact No: 919-60	5-0743 Email: gunn Rohne gmail.com
CONTACT NAME APPLYING IN OFFICE: RICK	7 0408	Phone # 919-723-666/ (UC 27526 AU UARINA Lot #: 180 Lot Size: 47,835 = Map Book & Page: 475, 477
PROPERTY LOCATION: Subdivision: 186 5mi	HOW DRIVE FLY	AL UARINA LOI #: 180 Lot Size: 47,835 5
State Road #State Road Name: 5	mithwood Dzive	Map Book & Page: 475 / 477
- 0653-94-9698.00	TT 68 08 06	5-3 01 0105-64
Zoning: RAP Flood Zone: NUX Watershed: NO	Deed Book & Page: 2003	Power Company: DUKE ENERCY
'New structures with Progress Energy as service provider n		from Progress Energy.
	() yes () no w/ a closet? ()	Monolithic s: Deck: Crawl Space: Slab: Slab: yes () no (if yes add in with # bedrooms) c: Site Built Deck: On Frame Off Frame
* *	basement (w/wo bath) Garage () yes () no Any other site bu	
Manufactured Home:SWDWTW (Size	x) # Bedròoms: G	arage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	<u> </u>
Home Occupation: # Rooms: Use:	Hours of Opera	ation:#Employees:
Addition/Accessory/Other: (Size 20x 40) Use:_	Addit	Closets in addition? () yes () no
Water Supply: County Existing Well	New Well (# of dwellings using well _) *Must have operable water before final
Sewage Supply: New Septic Tank (Complete Checkle	. .	
Does owner of this tract of land, own land that contains a ma	anufactured home within five hundred	feet (500') of tract listed above? () yes (X) no
Does the property contain any easements whether undergro	ound or overhead () yes () no	. •
Structures (existing or proposed): Single family dwellings:	Manufactured Home	s:Other (specify):
Required Residential Property Line Setbacks:	Comments:	·
Front Minimum 25 Actual 749 77		
Rear		
Sidestreet/corner lot		
Nearest Building		
on same lot Residential Land Use Application	Page 1 of 2	03/11

Page 1 of 2
APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: GO WEST ON EAST FRONT ST TURN RI. ON
S. MAIN ST - TURN LAFT ONTO W. CORNELIUS (GO 6 Miles) TURN PL. ON LAFAYETTE RA
(Go 1,2 miles) Tuen RI on Victoria Hills Deiuz (Go. 2 miles) TURN PL. on Tyleestone Dr.
100.1 miles) TUZN Rd. ONTO SMTHWOOD DEWE - ARRIVE AT 186 SMTHWOOD DE.
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.
Thereby state that foregoing state there's are accurate and correct to the best of my knowledge. Permit subject to revocation it raise 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.

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



(4)			
1 1/			
ED	Pohn	APPLICATION #	:
NAME:		b emploing for a sentic system insi	oection.*
County He		when applying for a septic system insp mprovement Permit and/or Au	*
IF THE INFORMA	alth Department Application for 1 ATION IN THIS APPLICATION IS FALSIFIED HORIZATION TO CONSTRUCT SHALL BEC	CHANGED, OR THE SITE IS ALTERED), THEN THE IMPROVEMENT ther 60 months or without expiration
	HORIZATION TO CONSTRUCT SHALL BECommentation submitted. (Complete site plan = 60	months: Complete plat = without expiration	n)
910-893	3-7525 option 1		#
 All prop 	ntal Health New Septic System Code perty Irons must be made visible. Pl st be clearly flagged approximately eve	800 ace "pink property flags" on each or ry 50 feet between corners.	corner iron of lot. All propert
			ag driveways, garages, decks al Permitting
out build	lings, swimming pools, etc. Place flags	per site plant developed dates controlled to	o assist in locating property.
If propert	ange Environmental Health card in loca ty is thickly wooded, Environmental He	aith requires that you clean out the	undergrowth to allow the soil
evaluatio	on to be performed. Inspectors should be	town effor confirmation \$25.00 ret	lurn trin fee may be incurred
• <u>All lots t</u>	to be addressed within 10 business c re to uncover outlet lid, mark house c	orners and property lines, etc. on	<u>ice lot confirmed ready.</u> In 1 to schedule and use code
After prepared to the pre	re to uncover outlet lid, mark nouse of paring proposed site call the voice permit is multiple a selecting notification permit if multiple	permits exist) for Environmental H	ealth inspection. Please note
/ Lloo Click	20Gov or IVD to varify results. Unite api	pluyeu, proceed to earth and a	g for perimis.
Environment	tal Health Existing Tank Inspections dove instructions for placing flags and ca	ard on property.	
Prepare f	for instructions for placing flags and ca for inspection by removing soil over ou and then put lid back in place. (Unles	itlet end of tank as diagram indica	ites, and lift lid straight up (# mobile home park)
possible)	EAVE LIDS OFF OF SEPTIC TANK	s mapacitor to to a continu	. 4 (8)
	EAVE LIDS OFF OF SEPTIC TANK overing outlet end call the voice permit permits, then use code 800 for Envi	ting system, at 910-893-7525 option	1 & select notification permit se note confirmation number
if multiple	permits, then use code 800 for Envi	Total Fleath Mepotition	
 Use Click? 	2Gov or IVR to hear results. Once appro	oved, proceed to Central Permitting	for remaining permits.
SEPTIC	orization to construct please indicate desired sy	stem type(s): can be ranked in order of p	reference, must choose one.
Accepted	[_] Innovative [_] Con	ventional (_} Any	
	. Other	· ·	
•••		nittal of this application if any of the fo	llowing apply to the property in
question. If the answ	notify the local health department upon sub- ver is "yes", applicant MUST ATTACH S	UPPORTING DOCUMENTATION:	
YES NO			
_ YES NC	and the second s	em 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 the	his property?
_}YES \(\sqrt{NO}	Is any wastewater going to be generat	ed on the site other than domestic sewa	ge?
(_)YES \(\sqrt{NO}		other Public Agency?	
YES NO	Are there any Easements or Right of \	Ways on this property?	
)YES {} NO	Does the site contain any existing wat	er, cable, phone or underground electric	: lines?
	If was please call No Cuts at 800-632-	4949 to locate the lines. This is a free	service.
Have Read This Appl	ication And Certify That The Information Pr	ovided Herein Is True, Complete And Co	orrect. Authorized County And
Ostalala Asa Cro	oted Biobs Of Entry To Conduct Necessary I	nspections To Determine Compliance wi	th Applicable Laws And Rules.
linderstand That I Ar	n Solely Responsible For The Proper Identific	cation And Labeling Of All Property Lin	es And Corners And Making
he Site Accessible So 1	That A Complete Site Evaluation Can Be Peri	'ormed.	11/2 1.2
10011	IN AL	· · · · · · · · · · · · · · · · · · ·	11/22/13
ROPERTY OWNER	RS OR OWNERS LEGAL REPRESENT	'ATIVE SIGNATURE (REQUIRED) DATE

DO NOT REMOVE!

: A oonlims dris ne Litim Af dris

Emsqx #: 69210

: 11/19/2013

:ftmmkongm

North American Title Insurance Company

Online: www.liensnc.com (NIII) 1 NAME DEPT. COM!

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC

27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (mailte support@licens.com)

Fuquay address but in Harnett County, Victoria Hills II subdivision

186 Smithwood Dr

Fuquay Varina, NC 27526

Harnett County

1-2 Family Dwelling

Palms & Pnrs



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.

Ovinda I mendi i shim

Edward Rohn 186 Smithwood Dr Fuquay Varina, NC 27526 United States

Email: gunny rohn@gmail.com Phone: 919-605-0743

Technical Support Hotline: (888) 690-7384

09/09/11

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 3500 325

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Application for Residential Building and Trades Permit

Owner's Name ED Rohn	Date 11/20/13
SILE Address 1860 Smith WOOD DIZIVE FUZUALUA	ARINA NC Phone
Directions to job site from Lillington (30 WEST on East Feart St	- TURNUET PRICHTON S. MAINST- TURN LEFT
W. Coenelius (6 miles) Tuen Right on LAFAYETTZ RO(1	. Zmles) Tuzn et on Victoria Hills De.
. 2 miles) Tuen Rt on Tylerstone DR. (COO. 1 miles) TURN	21. onto Smithwood Delus - April 8 A+ 186
Subdivision Victoria Hills II	Lot 180 onet
Description of Proposed Work 20X40 ADDITION (GREAT RE	# of Bedrooms
Heated SF <u>KOO</u> Unheated SF <u>Hoo</u> Finished Bonus Room? General Contractor Information	
ED Bohn (Homeowner)	919-605-0743
Building Contractor's Company Name	Telephone
186 Smith was DRIVE FUGUALUARINA NC	Gunnerolma amail com
Address 27526	Email Address
License # Flectrical Contractor Information	מה חנ
Description of Work ADDITION Service Size	Amps T-PoleYes \ No
Southern WAYE EIGHTELL	919-669-2711
Electrical Contractor's Company Name	Telephone
324 TK Allen ROAD LOUISBURY N 27549	CARL EASON 990 G MAIL
Address	Email Address
6201L License #	
Mechanical/HVAC Contractor Inform	<u>nation</u>
Description of Work	
COLLER H. A CONDITIONS ITE	919-552-9305
Mechanical Contractor's Company Name	Telephone
P.O. Box 1451 FURUAY-UARINA NC 27526	- 1444
Address	Email Address
15 350 License #	
Plumbing Contractor information	<u>n</u> , > , /
Description of Work Tristal Yz Bath	#Baths 1) /2 BATh
AUERY Plumbing	919-639-2023
Plumbing Contractor's Company Name	Telephone
3221 B Plain View Church Po Anger 12 Address 27501	
Address	Email Address
10886	
License # Insulation Contractor Information	n
TON ATENGETOR	919-772-9000
Insulation Contractor's Company Name & Address	Telephone

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 chances 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/Centractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner General Contractor 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 Company or Name

Sign w/Title

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 13-50032512 Date 12/13/13 Application type description CP ADD & ALTER RESIDENTIAL Subdivision Name VICTORIA HILLS Property Zoning RES/AGRI DIST - RA-30 Owner Contractor OWNER ROHN EDWARD & CINDY 186 SMITHWOOD DRIVE FUQUAY VARINA NC 27526 Applicant ROHN ED #180 Structure Information 000 000 20X40 ADDIT GREAT ROOM WITH 1/2 BATH Flood Zone FLOOD ZONE X Other struct info # BEDROOMS SEPTIC - EXISTING? WATER SUPPLY COUNTY ______ Permit RESIDENTIAL BUILDING PERMIT Additional desc . . Phone Access Code . 1010602
Issue Date . . . 12/13/13
Expiration Date . . 12/13/14 Valuation 51977 .____ Permit RESIDENTIAL ELECTRICAL PERMIT Additional desc . . 1010610 Phone Access Code . Valuation . . . 12/13/13 Permit RESIDENTIAL INSULATION PERMIT Additional desc . . Phone Access Code . 1010628 Valuation Issue Date . . . , 12/13/13 Expiration Date . . 12/13/14 Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1010644

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day.

		·		_ '	`	'.	
	Application Number Issue Date Expiration Date	1 12/13/13 6/11/14		•	Page Date	12/13/13	23
· ·	Permit Additional desc Phone Access Code . Issue Date Expiration Date	1010651 12/13/13	MECHANICAL PERMIT Valuation				0
	Permit	NOTIFICATION 1009604 11/20/13	N PERMIT Valuation		. ,		0
· .	Permit Additional desc Phone Access Code Issue Date Expiration Date	RESIDENTIAL 1010669 12/13/13 12/13/14	PLUMBING PERMIT Valuation				0

Special Notes and Comments

T/S: 11/26/2013 09:37 AM VBROWN ---- 186 SMITHWOOD DRIVE FUQ VAR. VICTORIA HILLS II SUB DIV #180.

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day.

_______ Page

Date 12/13/13

Application Number 13-50032512 Property Address 186 SMITHWOOD DR

. . 08-0653-01- -0105- -64-PARCEL NUMBER Application description . . . CP ADD & ALTER RESIDENTIAL

Subdivision Name VICTORIA HILLS
Property Zoning RES/AGRI DIST - RA-30

				Required Inspections		
 Sec		Phone Insp#	Insp Code	Description	Initials	Date
	Permit	type		. RESIDENTIAL BUILDING PERMIT		
999999999999999999999999999999999999999		103 111 105 309 101 429 425 131 125 329 325 229	B103 B111 B105 P309 B101 R429 R425 R131 R125 R329 R325 R229 R225	R*BLDG FOUND & TEMP SVC POLE R*BLDG SLAB INSP/TEMP SVC POLE R*OPEN FLOOR R*PLUMB UNDER SLAB R*BLDG FOOTING / TEMP SVC POLE FOUR TRADE FINAL FOUR TRADE ROUGH IN ONE TRADE FINAL ONE TRADE ROUGH IN THREE TRADE FINAL THREE TRADE FINAL TWO TRADE FINAL TWO TRADE ROUGH IN		
999	Permit Permit	type 129	 I129	. RESIDENTIAL INSULATION PERMIT R*INSULATION INSPECTION . NOTIFICATION PERMIT		_/_/_
999 999 999 999		800 804 806 802 826	H800 F804 P806 B802 H826	ENVIR. HLTH. CONFIRMATION FIRE MARSHAL PLAN REVIEW PLANNING REVIEW BLDG PLAN REVIEW ENVIR HLTH/SANI PLAN REVIEW	JM AP	12/05/13

COUNTY OF HARNETT Building Inspections Department Planning Services Certificate of Compliance:_____ Certificate of Compliance: Occupancy: Certificate issued pursuant to the requirements of North Carolina General Statute 153A-363 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following: Use Classification: Residential (20x40 Addition) **Permit Numbers** Name: Edward & Cind Rohn Building: Electrical: Address: 186 Smith Insulation: Plumbing: _ Mechanical: MFG Home: **Building Official:** Date: Z - 27 - 14

PREPARED 2/26/14, 14:11:45 INSPECTION TICKET Harnett County PAGE INSPECTOR: IVR -----DATE 2/27/14 ADDRESS . : 186 SMITHWOOD DR SUBDIV: VICTORIA HILLS CONTRACTOR : OWNER . . : ROHN EDWARD & CINDY PHONE : PARCEL . . : 08-0653-01- -0105- -64-PHONE : APPL NUMBER: 13-50032512 CP ADD & ALTER RESIDENTIAL DIRECTIONS : T/S: 11/26/2013 09:37 AM VBROWN ----186 SMITHWOOD DRIVE FUQ VAR. VICTORIA HILLS II SUB DIV #180. LAND NOTES : LXMN 5/15/03 LOT 180 STRUCTURE: 000 000 20X40 ADDIT GREAT ROOM WITH 1/2 BATH FLOOD ZONE : FLOOD ZONE \boldsymbol{X} # BEDROOMS : SEPTIC - EXISTING? . . . : EXISTING .00 WATER SUPPLY : COUNTY PERMIT: CPBP 00 CP BUILDING PERMIT REQUESTED INSP DESCRIPTION TYP/SQ COMPLETED RESULT RESULTS/COMMENTS ______ H824 01 12/13/13 JM ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002476489 12/13/13 AP T/S: 12/16/2013 10:36 AM VBROWN -----T/S: 12/16/2013 10:37 AM SSTEWART -----T/S: 12/16/2013 10:38 AM SSTEWART -----B101 01 12/17/13 BS R*BLDG FOOTING / TEMP SVC POLE VRU #: 002476564 12/17/13 AP T/S: December 17, 2013 03:57 PM BSUTTON -----B103 01 12/27/13 KS 12/27/13 AP R*BLDG FOUND & TEMP SVC POLE VRU #: 002479883 T/S: 12/27/2013 10:27 AM KSLATTUM -----B105 01 1/02/14 BS R*OPEN FLOOR VRU #: 002481111 1/02/14 AΡ T/S: January 02, 2014 11:06 AM BSUTTON -----Naill all OSB 6" on edges, 12" in field Minimum. Need engineers letter on substitution of wedge anchors for anchor bolts. Ok to continue, check at rough inspections R425 01 1/22/14 DT FOUR TRADE ROUGH IN VRU #: 002486054 1/22/14 DA T/S: 01/22/2014 12:07 PM DETAYLOR -----House not ready for rough in R425 02 1/23/14 DT FOUR TRADE ROUGH IN VRU #: 002487122 1/23/14 DA T/S: 01/23/2014 01:35 PM DETAYLOR -----Missing air barriers Fire block chase for hvac

------ COMMENTS AND NOTES -----

FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002488385

FOUR TRADE FINAL TIME: 17:00 VRU #: 002497071

T/S: 01/27/2014 08:14 AM DJOHNSON -----T/S: January 28, 2014 08:39 AM BSUTTON -----

T/S: 02/26/2014 08:51 AM VBROWN -----

Install window and door Okay to side and insulate

R425 03

R429 01

1/28/14 BS

1/28/14

2/27/14

2/27/14